

Essentials (E4)

Formulary Drug List

Effective 08-01-2025

How to use this list:

Your drugs fall into 4 tiers: Preferred Generic (1), Preferred Brand (2), Preferred Specialty (3), and non-Preferred (4).

Please see the chart on page 3 for information.

Have any questions? Please call customer service at: 844-722-HMO1 (4661) (TTY:711), Monday through Friday, 5 a.m. to 8p.m. Pacific Time.

What is the list of covered drugs (Formulary Drug List)?

This document contains a list of generic, brand and specialty drugs covered under your plan.

How is the list of covered drugs developed?

The formulary drug list is developed with an independent committee of physicians, pharmacists, and other healthcare providers called the Pharmacy and Therapeutics Committee. This independent committee reviews and selects drugs for coverage based on each drug's safety, effectiveness, and cost.

The committee meets at least quarterly to review new drugs to market to determine placement on this list and reviews updated safety, effectiveness, and cost information for existing drugs to ensure the drug list remains up to date with current medical evidence.

How do I use the Formulary Drug List?

Drugs are listed by categories depending on the type of medical conditions that they are used to treat. If you know what your drug is used for, look for the category name in the list that begins below. Then look under the category name for your drug.

If you are not sure what category to look under, you can also search for the drug in the index. The index provides an alphabetical list of all the drugs included in this document. Next to the name of the drug in the index, you will see the page number where you can find coverage information. Turn to the page listed in the index and find the name of your drug in the first column of the list.

How does the Formulary Drug List help me understand my drug coverage?

Drug coverage is based on your coverage contract. Coverage for a specific drug is subject to the rules outlined in your member booklet. This document will tell you if a drug is included on the drug list attached to your plan.

Will the Formulary Drug List change?

The formulary drug list is updated throughout the year. If you are taking a drug and it will be removed from the drug list or moved to a higher cost sharing tier, we will notify you of this change via letter. We also post information on upcoming drug list changes on our website on the “Drug List Changes” page.

Are there any restrictions on my coverage?

Some covered drugs may have additional requirements or limits on coverage. These can be seen in the column next to the drug name on the list. These requirements and limits may include:

- **Age Limits:** Some drugs have age limits due to Food and Drug Administration (FDA) approved indications. For example, Drug A is limited to ages 2 through 5 years of age
- **Prior Authorization:** Some drugs require prior approval before they are covered.
- **Quantity Limits:** For some drugs, we limit the amount of the drug that we will cover. For example, we will cover 18 per 30-day supply of zolmitriptan oral tablets.
- **Step Therapy:** For some drugs we require that you first try certain drugs to treat your medical condition before we will cover another drug for that condition. For example, if Drug A and Drug B both treat your medical condition, we may not cover Drug B unless you try Drug A first. If Drug A does not work for you, then we will then cover Drug B.

Drugs subject to these restrictions will generally mean that your physician or healthcare provider may need to provide additional information on your medical condition before the drug will be covered at the pharmacy. Information on this process is on our website on the “Drugs Requiring Approval” page.

Essentials (E4) Formulary Drug List

The first column of the chart lists the drug name. Brand name drugs are capitalized (e.g., JANUVIA) and generic drugs are listed in lower-case italics (e.g., *metformin oral tablet*).

The information in the Requirements/Limits column tells you if we have any special requirements for coverage of your drug.

The amount you pay for a covered drug will depend on if you have met any applicable deductible for the plan year, if you have met any applicable maximum out of pocket for the plan year and what tier the medication is on.

More information on applicable deductibles and maximum out of pockets can be found in your member booklet.

Essentials (E4) Formulary Drug List

Drug Tier	Includes
Preferred Generic (1)	Tier 1 is the lowest tier and includes preferred generic drugs.
Preferred Brand (2)	Tier 2 includes preferred brand drugs.
Preferred Specialty (3)	Tier 3 includes preferred specialty drugs. In general, specialty drugs are drugs typically used to treat chronic, complex, or rare conditions and may require enhanced clinical support. Specialty Drugs are generally limited to a month supply on dispense. Please check your member booklet for more details.
Non-Preferred Drugs (4)	Tier 4 includes generic, brand and specialty drugs. Non preferred drugs are lower value (more expensive and/or less safe and effective than their alternatives in Tier 1, Tier 2, or Tier 3.)

COVERAGE AND ABBREVIATIONS

ABBREVIATION	DESCRIPTION	EXPLANATION
UTILIZATION MANAGEMENT RESTRICTIONS		
PA	Prior Authorization Restriction	You (or your physician) are required to get prior authorization from us before you fill you prescription for this drug. Without prior approval, we may not cover this drug.
QL	Quantity Limit Restriction	We limit the amount of this drug that is covered per prescription, or within a specific time frame.
ST	Step Therapy Restriction	Before we provide coverage for this drug you must first try another drug to treat your medical condition. This drug may only be covered if the other drug does not work for you.
OTHER SPECIAL REQUIREMENTS FOR COVERAGE		
SP	Specialty Pharmacy	In general, specialty drugs are drugs typically used to treat chronic, complex, or rare conditions and may require enhanced clinical support. Specialty Drugs are generally limited to a month supply on dispense. Please check your member booklet for more details.
OCh	Oral Chemo	Oral Chemotherapy Drug. Certain oral chemotherapy drugs may be covered under your medical plan. Please check your member booklet for more details.

ACA PV	Affordable Care Act (ACA) Preventive Medication	<p>The Affordable Care Act (ACA) makes certain preventive medications available to you at no cost when you meet the requirements of the U.S. Preventive Services Task Force (USPSTF) recommendation grade of "A" or "B."</p> <p><i>The coverage in full for some drugs is limited to the following:</i></p> <ul style="list-style-type: none"> • <i>Bowel prep (example: peg 3350-electrolytes oral recon soln): Covered for persons between 45 and 75 years old. Limited to 2 prescriptions per year.</i> • <i>Breast cancer prevention (tamoxifen, raloxifene, anastrozole, exemestane, Soltamox liquid, letrozole): Covered in full for persons 35 years or older.</i> • <i>Fluoride: Covered in full for persons 6 months old through 16 years old</i> • <i>Smoking cessation aids (example: nicotine patches): Covered in full for persons 18 years or older. Limited to 180 days per year.</i> • <i>Statins (example: atorvastatin): Covered in full for persons 40 years old through 75 years old.</i> <p><i>Coverage outside of the limits described above will be at the tier in the "Drug Tier" column.</i></p>
LA	Limited Access Drug	Some drugs under your plan may only be filled at an in-network specialty pharmacy. These are drugs where the FDA has restricted distribution or are drugs that require special handling, provider coordination, or patient education that cannot be met by a network retail pharmacy.
EX	Excluded Drug	This drug is excluded from the Essentials formulary. You will be responsible for the full cost of the drug at the pharmacy.

If you are unsure what plan you are on, check the front of your member ID card or call customer service at 844-722-HMO1 (4661) Monday through Friday, 5 am to 8 pm Pacific time.

Drug Name	Tier	Requirements / Limits
ANTI - INFECTIVES		
ANTIFUNGAL AGENTS		
ANCOBON ORAL CAPSULE 250 MG, 500 MG	4	
BREXAFEMME ORAL TABLET 150 MG	4	PA; QL (24 per 180 days)
<i>clotrimazole mucous membrane troche 10 mg</i>	1	
CRESEMBA ORAL CAPSULE 186 MG, 74.5 MG	4	PA
DIFLUCAN ORAL SUSPENSION FOR RECONSTITUTION 40 MG/ML	4	
DIFLUCAN ORAL TABLET 100 MG	4	
<i>fluconazole oral suspension for reconstitution 10 mg/ml, 40 mg/ml</i>	1	
<i>fluconazole oral tablet 100 mg, 150 mg, 200 mg, 50 mg</i>	1	
<i>flucytosine oral capsule 250 mg, 500 mg</i>	1	
<i>griseofulvin microsize oral suspension 125 mg/5 ml</i>	1	
<i>griseofulvin microsize oral tablet 500 mg</i>	1	
<i>griseofulvin ultramicrosize oral tablet 125 mg, 250 mg</i>	4	
<i>griseofulvin ultramicrosize oral tablet 165 mg</i>	EX	
<i>itraconazole oral capsule 100 mg</i>	1	
<i>itraconazole oral solution 10 mg/ml</i>	4	
<i>ketoconazole oral tablet 200 mg</i>	1	
NOXAFIL ORAL SUSP, DELAYED RELEASE FOR RECON 300 MG	4	PA
NOXAFIL ORAL SUSPENSION 200 MG/5 ML (40 MG/ML)	EX	
NOXAFIL ORAL TABLET, DELAYED RELEASE (DR/EC) 100 MG	EX	
<i>nystatin oral suspension 100,000 unit/ml</i>	1	
<i>nystatin oral tablet 500,000 unit</i>	1	
ORAVIG MUCO-ADHESIVE BUCCAL TABLET 50 MG	EX	
<i>posaconazole oral suspension 200 mg/5 ml (40 mg/ml)</i>	4	
<i>posaconazole oral tablet, delayed release (dr/ec) 100 mg</i>	4	

Drug Name	Tier	Requirements / Limits
SPORANOX ORAL CAPSULE 100 MG	4	
<i>terbinafine hcl oral tablet 250 mg</i>	1	
TOLSURA ORAL CAPSULE, SOLID DISPERSION 65 MG	EX	
VFEND ORAL SUSPENSION FOR RECONSTITUTION 200 MG/5 ML (40 MG/ML)	4	ST
VFEND ORAL TABLET 50 MG	4	ST
VIVJOA ORAL CAPSULE 150 MG	4	PA; SP
<i>voriconazole oral suspension for reconstitution 200 mg/5 ml (40 mg/ml)</i>	1	
<i>voriconazole oral tablet 200 mg, 50 mg</i>	1	
ANTIVIRALS		
<i>abacavir oral solution 20 mg/ml</i>	1	QL (60 per 30 days)
<i>abacavir oral tablet 300 mg</i>	1	QL (60 per 30 days)
<i>abacavir-lamivudine oral tablet 600-300 mg</i>	4	QL (30 per 30 days)
<i>acyclovir oral capsule 200 mg</i>	1	
<i>acyclovir oral suspension 200 mg/5 ml</i>	1	
<i>acyclovir oral tablet 400 mg, 800 mg</i>	1	
<i>adefovir oral tablet 10 mg</i>	1	
<i>amantadine hcl oral capsule 100 mg</i>	1	
<i>amantadine hcl oral solution 50 mg/5 ml</i>	1	
<i>amantadine hcl oral tablet 100 mg</i>	1	
APRETUDE INTRAMUSCULAR SUSPENSION, EXTENDED RELEASE 600 MG/3 ML (200 MG/ML)	4	PA; SP
APTIVUS ORAL CAPSULE 250 MG	2	QL (120 per 30 days)
<i>atazanavir oral capsule 150 mg, 300 mg</i>	1	QL (30 per 30 days)
<i>atazanavir oral capsule 200 mg</i>	1	QL (60 per 30 days)
BARACLUDGE ORAL SOLUTION 0.05 MG/ML	EX	
BARACLUDGE ORAL TABLET 0.5 MG, 1 MG	EX	
BEYFORTUS INTRAMUSCULAR SYRINGE 100 MG/ML, 50 MG/0.5 ML	2	VAC
BIKTARVY ORAL TABLET 30-120-15 MG, 50-200-25 MG	2	QL (30 per 30 days)
CABENUVA INTRAMUSCULAR SUSPENSION, EXTENDED RELEASE 400 MG/2 ML- 600 MG/2 ML, 600 MG/3 ML- 900 MG/3 ML	3	SP

Drug Name	Tier	Requirements / Limits
CIMDUO ORAL TABLET 300-300 MG	4	QL (30 per 30 days)
COMPLERA ORAL TABLET 200-25-300 MG	2	QL (30 per 30 days)
<i>darunavir oral tablet 600 mg</i>	1	QL (60 per 30 days)
<i>darunavir oral tablet 800 mg</i>	1	QL (30 per 30 days)
DELSTRIGO ORAL TABLET 100-300-300 MG	EX	
DESCOVY ORAL TABLET 120-15 MG, 200-25 MG	4	PA
DOVATO ORAL TABLET 50-300 MG	2	QL (30 per 30 days)
EDURANT ORAL TABLET 25 MG	2	QL (30 per 30 days)
EDURANT PED ORAL TABLET FOR SUSPENSION 2.5 MG	2	QL (180 per 30 days)
<i>efavirenz oral tablet 600 mg</i>	1	QL (30 per 30 days)
<i>efavirenz-emtricitabin-tenofovir oral tablet 600-200-300 mg</i>	4	
<i>efavirenz-lamivudine-tenofovir disoproxil fumarate oral tablet 400-300-300 mg, 600-300-300 mg</i>	1	
<i>emtricitabine oral capsule 200 mg</i>	1	QL (30 per 30 days)
<i>emtricitabine-tenofovir (tdf) oral tablet 100-150 mg, 133-200 mg, 167-250 mg, 200-300 mg</i>	1	
<i>emtricitabine-tenofovir disoproxil fumarate oral tablet 200-25-300 mg</i>	1	
EMTRIVA ORAL CAPSULE 200 MG	4	QL (30 per 30 days)
EMTRIVA ORAL SOLUTION 10 MG/ML	2	QL (120 per 30 days)
<i>entecavir oral tablet 0.5 mg, 1 mg</i>	1	
EPCLUSA ORAL PELLETS IN PACKET 150-37.5 MG, 200-50 MG	3	PA; SP; LA
EPCLUSA ORAL TABLET 200-50 MG, 400-100 MG	3	PA; SP; LA
EPIVIR ORAL SOLUTION 10 MG/ML	4	PA; QL (900 per 30 days)
EPIVIR ORAL TABLET 150 MG, 300 MG	4	PA; QL (60 per 30 days)
<i>etravirine oral tablet 100 mg, 200 mg</i>	1	QL (60 per 30 days)
EVOTAZ ORAL TABLET 300-150 MG	4	QL (30 per 30 days)
<i>famciclovir oral tablet 125 mg, 250 mg, 500 mg</i>	1	
FLUMADINE ORAL TABLET 100 MG	4	
<i>fosamprenavir oral tablet 700 mg</i>	1	QL (60 per 30 days)
FUZEON SUBCUTANEOUS RECON SOLN 90 MG	3	SP; QL (30 per 30 days)

Drug Name	Tier	Requirements / Limits
GENVOYA ORAL TABLET 150-150-200-10 MG	2	QL (30 per 30 days)
HARVONI ORAL PELLETS IN PACKET 33.75-150 MG, 45-200 MG	3	PA; SP; LA
HARVONI ORAL TABLET 45-200 MG, 90-400 MG	3	PA; SP; LA
INTELENCE ORAL TABLET 100 MG, 200 MG, 25 MG	4	QL (60 per 30 days)
ISENTRESS HD ORAL TABLET 600 MG	2	QL (60 per 30 days)
ISENTRESS ORAL POWDER IN PACKET 100 MG	4	QL (60 per 30 days)
ISENTRESS ORAL TABLET 400 MG	2	QL (60 per 30 days)
ISENTRESS ORAL TABLET, CHEWABLE 100 MG, 25 MG	2	QL (60 per 30 days)
JULUCA ORAL TABLET 50-25 MG	2	QL (30 per 30 days)
KALETRA ORAL SOLUTION 400-100 MG/5 ML	4	QL (320 per 30 days)
KALETRA ORAL TABLET 100-25 MG	4	QL (60 per 30 days)
KALETRA ORAL TABLET 200-50 MG	4	QL (120 per 30 days)
<i>lamivudine oral solution 10 mg/ml</i>	1	QL (900 per 30 days)
<i>lamivudine oral tablet 100 mg</i>	1	
<i>lamivudine oral tablet 150 mg, 300 mg</i>	1	QL (60 per 30 days)
<i>lamivudine-zidovudine oral tablet 150-300 mg</i>	1	QL (60 per 30 days)
LEDIPASVIR-SOFOSBUVIR ORAL TABLET 90-400 MG	4	PA; SP; LA
LIVTENCITY ORAL TABLET 200 MG	4	PA; SP
<i>lopinavir-ritonavir oral tablet 100-25 mg</i>	1	QL (60 per 30 days)
<i>lopinavir-ritonavir oral tablet 200-50 mg</i>	1	QL (120 per 30 days)
<i>maraviroc oral tablet 150 mg, 300 mg</i>	1	QL (60 per 30 days)
MAVYRET ORAL PELLETS IN PACKET 50-20 MG	3	PA; SP; LA
MAVYRET ORAL TABLET 100-40 MG	3	PA; SP; LA
<i>nevirapine oral suspension 50 mg/5 ml</i>	1	QL (60 per 30 days)
<i>nevirapine oral tablet 200 mg</i>	1	QL (60 per 30 days)
<i>nevirapine oral tablet extended release 24 hr 100 mg, 400 mg</i>	1	QL (30 per 30 days)
NORVIR ORAL POWDER IN PACKET 100 MG	2	QL (360 per 30 days)
NORVIR ORAL TABLET 100 MG	4	QL (360 per 30 days)

Drug Name	Tier	Requirements / Limits
ODEFSEY ORAL TABLET 200-25-25 MG	2	QL (30 per 30 days)
<i>oseltamivir oral capsule 30 mg</i>	1	QL (40 per 365 days)
<i>oseltamivir oral capsule 45 mg, 75 mg</i>	1	QL (20 per 365 days)
<i>oseltamivir oral suspension for reconstitution 6 mg/ml</i>	1	QL (360 per 365 days)
PAXLOVID ORAL TABLETS, DOSE PACK 150 MG (10)- 100 MG (10), 150 MG (6)- 100 MG (5), 300 MG (150 MG X 2)-100 MG	2	QL (40 per 90 days)
PIFELTRO ORAL TABLET 100 MG	EX	
PREVYMIS ORAL PELLETS IN PACKET 120 MG, 20 MG	4	
PREVYMIS ORAL TABLET 240 MG, 480 MG	4	
PREZCOBIX ORAL TABLET 800-150 MG-MG	4	QL (30 per 30 days)
PREZISTA ORAL SUSPENSION 100 MG/ML	2	QL (30 per 30 days)
PREZISTA ORAL TABLET 150 MG, 75 MG	2	QL (60 per 30 days)
PREZISTA ORAL TABLET 600 MG	4	QL (60 per 30 days)
PREZISTA ORAL TABLET 800 MG	4	QL (30 per 30 days)
RELENZA DISKHALER INHALATION BLISTER WITH DEVICE 5 MG/ACTUATION	4	QL (2 per 365 days)
RETROVIR ORAL CAPSULE 100 MG	4	QL (60 per 30 days)
RETROVIR ORAL SYRUP 10 MG/ML	4	QL (960 per 30 days)
REYATAZ ORAL CAPSULE 200 MG	4	QL (60 per 30 days)
REYATAZ ORAL CAPSULE 300 MG	4	QL (30 per 30 days)
REYATAZ ORAL POWDER IN PACKET 50 MG	4	QL (150 per 30 days)
<i>ribavirin inhalation recon soln 6 gram</i>	4	
<i>ribavirin oral capsule 200 mg</i>	3	SP; LA
<i>ribavirin oral tablet 200 mg</i>	3	SP; LA
<i>rimantadine oral tablet 100 mg</i>	1	
<i>ritonavir oral tablet 100 mg</i>	1	QL (360 per 30 days)
RUKOBIA ORAL TABLET EXTENDED RELEASE 12 HR 600 MG	4	PA; QL (60 per 30 days)
SELZENTRY ORAL SOLUTION 20 MG/ML	2	QL (8 per 30 days)
SELZENTRY ORAL TABLET 150 MG, 300 MG	4	QL (60 per 30 days)
SOFOSBUVIR-VELPATASVIR ORAL TABLET 400-100 MG	4	PA; SP; LA
SOVALDI ORAL PELLETS IN PACKET 150 MG, 200 MG	3	PA; SP; LA

Drug Name	Tier	Requirements / Limits
SOVALDI ORAL TABLET 200 MG, 400 MG	3	PA; SP; LA
STRIBILD ORAL TABLET 150-150-200-300 MG	4	QL (30 per 30 days)
SUNLENCA ORAL TABLET 300 MG	4	PA; SP; QL (2 per 365 days)
SUNLENCA SUBCUTANEOUS SOLUTION 309 MG/ML	4	PA; SP; QL (6 per 365 days)
SYMFI ORAL TABLET 600-300-300 MG	4	QL (30 per 30 days)
SYMTUZA ORAL TABLET 800-150-200-10 MG	4	
TAMIFLU ORAL CAPSULE 30 MG	4	QL (40 per 365 days)
TAMIFLU ORAL CAPSULE 45 MG, 75 MG	4	QL (20 per 365 days)
TAMIFLU ORAL SUSPENSION FOR RECONSTITUTION 6 MG/ML	4	QL (6 per 365 days)
TEMBEXA ORAL SUSPENSION 10 MG/ML	4	
TEMBEXA ORAL TABLET 100 MG	4	
<i>tenofovir disoproxil fumarate oral tablet 300 mg</i>	1	QL (30 per 30 days)
TIVICAY ORAL TABLET 50 MG	2	QL (60 per 30 days)
TIVICAY PD ORAL TABLET FOR SUSPENSION 5 MG	2	QL (60 per 30 days)
TRIUMEQ ORAL TABLET 600-50-300 MG	2	QL (30 per 30 days)
TRIUMEQ PD ORAL TABLET FOR SUSPENSION 60-5-30 MG	4	QL (30 per 30 days)
TRUVADA ORAL TABLET 100-150 MG, 133-200 MG, 167-250 MG, 200-300 MG	4	PA
TYBOST ORAL TABLET 150 MG	2	QL (30 per 30 days)
<i>valacyclovir oral tablet 1 gram, 500 mg</i>	1	
VALCYTE ORAL RECON SOLN 50 MG/ML	4	
VALCYTE ORAL TABLET 450 MG	4	
<i>valganciclovir oral recon soln 50 mg/ml</i>	4	
<i>valganciclovir oral tablet 450 mg</i>	1	
VALTREX ORAL TABLET 1 GRAM, 500 MG	EX	
VEMLIDY ORAL TABLET 25 MG	4	PA
VIRACEPT ORAL TABLET 250 MG	2	QL (90 per 30 days)
VIRACEPT ORAL TABLET 625 MG	2	QL (60 per 30 days)
VIREAD ORAL POWDER 40 MG/SCOOP (40 MG/GRAM)	4	PA; QL (240 per 30 days)
VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG	2	PA; QL (30 per 30 days)

Drug Name	Tier	Requirements / Limits
VIREAD ORAL TABLET 300 MG	4	PA; QL (30 per 30 days)
VOSEVI ORAL TABLET 400-100-100 MG	3	PA; SP; LA
XOFLUZA ORAL TABLET 40 MG, 80 MG	4	QL (2 per 365 days)
ZEPATIER ORAL TABLET 50-100 MG	4	PA; SP; LA
ZIAGEN ORAL SOLUTION 20 MG/ML	4	QL (60 per 30 days)
<i>zidovudine oral capsule 100 mg</i>	1	QL (60 per 30 days)
<i>zidovudine oral syrup 10 mg/ml</i>	1	QL (960 per 30 days)
<i>zidovudine oral tablet 300 mg</i>	1	QL (60 per 30 days)
CEPHALOSPORINS		
<i>cefaclor oral capsule 250 mg, 500 mg</i>	1	
<i>cefaclor oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml, 375 mg/5 ml</i>	1	
<i>cefaclor oral tablet extended release 12 hr 500 mg</i>	4	
<i>cefadroxil oral capsule 500 mg</i>	1	
<i>cefadroxil oral suspension for reconstitution 250 mg/5 ml, 500 mg/5 ml</i>	1	
<i>cefadroxil oral tablet 1 gram</i>	1	
<i>cefazolin injection recon soln 1 gram, 3 gram</i>	4	
<i>cefdinir oral capsule 300 mg</i>	1	
<i>cefdinir oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml</i>	1	
<i>cefixime oral capsule 400 mg</i>	1	
<i>cefixime oral suspension for reconstitution 100 mg/5 ml, 200 mg/5 ml</i>	1	
<i>cefpodoxime oral suspension for reconstitution 100 mg/5 ml, 50 mg/5 ml</i>	1	
<i>cefpodoxime oral tablet 100 mg, 200 mg</i>	1	
<i>cefprozil oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml</i>	1	
<i>cefprozil oral tablet 250 mg, 500 mg</i>	1	
<i>ceftriaxone injection recon soln 1 gram, 250 mg, 500 mg</i>	4	
<i>cefuroxime axetil oral tablet 250 mg, 500 mg</i>	1	
<i>cephalexin oral capsule 250 mg, 500 mg, 750 mg</i>	1	
<i>cephalexin oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml</i>	1	
<i>cephalexin oral tablet 250 mg, 500 mg</i>	1	

Drug Name	Tier	Requirements / Limits
ERYTHROMYCINS & OTHER MACROLIDES		
<i>azithromycin oral packet 1 gram</i>	1	
<i>azithromycin oral suspension for reconstitution 100 mg/5 ml, 200 mg/5 ml</i>	1	
<i>azithromycin oral tablet 250 mg, 500 mg, 600 mg</i>	1	
<i>clarithromycin oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml</i>	1	
<i>clarithromycin oral tablet 250 mg, 500 mg</i>	1	
<i>clarithromycin oral tablet extended release 24 hr 500 mg</i>	1	
DIFICID ORAL SUSPENSION FOR RECONSTITUTION 40 MG/ML	4	
DIFICID ORAL TABLET 200 MG	4	
<i>e.e.s. oral tablet 400 mg</i>	1	
E.E.S. GRANULES ORAL SUSPENSION FOR RECONSTITUTION 200 MG/5 ML	4	
ERYPED 200 ORAL SUSPENSION FOR RECONSTITUTION 200 MG/5 ML	EX	
ERYPED 400 ORAL SUSPENSION FOR RECONSTITUTION 400 MG/5 ML	EX	
<i>ery-tab oral tablet, delayed release (dr/ec) 250 mg, 333 mg</i>	1	
ERY-TAB ORAL TABLET, DELAYED RELEASE (DR/EC) 500 MG	4	
<i>erythrocin (as stearate) oral tablet 250 mg</i>	1	
<i>erythromycin ethylsuccinate oral suspension for reconstitution 200 mg/5 ml, 400 mg/5 ml</i>	1	
<i>erythromycin ethylsuccinate oral tablet 400 mg</i>	1	
<i>erythromycin oral capsule, delayed release (dr/ec) 250 mg</i>	1	
<i>erythromycin oral tablet 250 mg, 500 mg</i>	1	
<i>erythromycin oral tablet, delayed release (dr/ec) 250 mg, 333 mg, 500 mg</i>	1	
ZITHROMAX ORAL PACKET 1 GRAM	4	
ZITHROMAX ORAL SUSPENSION FOR RECONSTITUTION 100 MG/5 ML, 200 MG/5 ML	4	
ZITHROMAX ORAL TABLET 250 MG, 500 MG	4	

Drug Name	Tier	Requirements / Limits
ZITHROMAX TRI-PAK ORAL TABLET 500 MG	4	
ZITHROMAX Z-PAK ORAL TABLET 250 MG	4	
MISCELLANEOUS ANTIINFECTIVES		
<i>albendazole oral tablet 200 mg</i>	4	PA
ALINIA ORAL SUSPENSION FOR RECONSTITUTION 100 MG/5 ML	4	PA
ALINIA ORAL TABLET 500 MG	EX	
<i>amikacin injection solution 500 mg/2 ml</i>	4	
ARAKODA ORAL TABLET 100 MG	4	
ARIKAYCE INHALATION SUSPENSION FOR NEBULIZATION 590 MG/8.4 ML	4	PA; SP
<i>atovaquone oral suspension 750 mg/5 ml</i>	1	
<i>atovaquone-proguanil oral tablet 250-100 mg, 62.5-25 mg</i>	1	
BENZNIDAZOLE ORAL TABLET 100 MG, 12.5 MG	4	
BETHKIS INHALATION SOLUTION FOR NEBULIZATION 300 MG/4 ML	EX	
BILTRICIDE ORAL TABLET 600 MG	4	
CAYSTON INHALATION SOLUTION FOR NEBULIZATION 75 MG/ML	4	PA; SP; LA; QL (84 per 30 days)
<i>chloroquine phosphate oral tablet 250 mg, 500 mg</i>	1	
CLEOCIN HCL ORAL CAPSULE 150 MG, 300 MG, 75 MG	4	
CLEOCIN PEDIATRIC ORAL RECON SOLN 75 MG/5 ML	4	
<i>clindamycin hcl oral capsule 150 mg, 300 mg, 75 mg</i>	1	
<i>clindamycin pediatric oral recon soln 75 mg/5 ml</i>	1	
COARTEM ORAL TABLET 20-120 MG	4	
<i>colistin (colistimethate na) injection recon soln 150 mg</i>	4	
COLY-MYCIN M PARENTERAL INJECTION RECON SOLN 150 MG	4	
<i>cycloserine oral capsule 250 mg</i>	1	
<i>dapsone oral tablet 100 mg, 25 mg</i>	1	
DARAPRIM ORAL TABLET 25 MG	EX	

Drug Name	Tier	Requirements / Limits
EMVERM ORAL TABLET, CHEWABLE 100 MG	4	PA
<i>ethambutol oral tablet 100 mg, 400 mg</i>	1	
<i>gentamicin injection solution 40 mg/ml</i>	4	
HUMATIN ORAL CAPSULE 250 MG	4	PA; SP; LA
<i>hydroxychloroquine oral tablet 100 mg, 200 mg, 300 mg, 400 mg</i>	1	
IMPAVIDO ORAL CAPSULE 50 MG	4	PA
<i>isoniazid oral solution 50 mg/5 ml</i>	1	
<i>isoniazid oral tablet 100 mg, 300 mg</i>	1	
<i>ivermectin oral tablet 3 mg</i>	1	QL (20 per 30 days)
<i>ivermectin oral tablet 6 mg</i>	EX	
KITABIS PAK INHALATION SOLUTION FOR NEBULIZATION 300 MG/5 ML	4	PA; SP
KRINTAFEL ORAL TABLET 150 MG	EX	
LAMPIT ORAL TABLET 120 MG, 30 MG	4	
LIKMEZ ORAL SUSPENSION 500 MG/5 ML	4	PA
<i>linezolid oral suspension for reconstitution 100 mg/5 ml</i>	1	
<i>linezolid oral tablet 600 mg</i>	1	
MALARONE ORAL TABLET 250-100 MG	4	
MALARONE PEDIATRIC ORAL TABLET 62.5-25 MG	4	
<i>mefloquine oral tablet 250 mg</i>	1	
MEPRON ORAL SUSPENSION 750 MG/5 ML	4	
<i>metronidazole oral capsule 375 mg</i>	1	
METRONIDAZOLE ORAL TABLET 125 MG	EX	
<i>metronidazole oral tablet 250 mg, 500 mg</i>	1	
NEBUPENT INHALATION RECON SOLN 300 MG	EX	
<i>neomycin oral tablet 500 mg</i>	1	
<i>nitazoxanide oral tablet 500 mg</i>	4	
PASER ORAL GRANULES DR FOR SUSP IN PACKET 4 GRAM	4	
<i>pentamidine inhalation recon soln 300 mg</i>	4	
PLAQUENIL ORAL TABLET 200 MG	4	
<i>praziquantel oral tablet 600 mg</i>	4	

Drug Name	Tier	Requirements / Limits
PRETOMANID ORAL TABLET 200 MG	4	
PRIFTIN ORAL TABLET 150 MG	4	
<i>primaquine oral tablet 26.3 mg (15 mg base)</i>	4	
<i>pyrazinamide oral tablet 500 mg</i>	1	
<i>pyrimethamine oral tablet 25 mg</i>	4	PA
QUALAQUIN ORAL CAPSULE 324 MG	4	
<i>quinine sulfate oral capsule 324 mg</i>	1	
<i>rifabutin oral capsule 150 mg</i>	1	
<i>rifampin oral capsule 150 mg, 300 mg</i>	1	
SIRTURO ORAL TABLET 100 MG, 20 MG	4	PA
SIVEXTRO ORAL TABLET 200 MG	4	
SOLOSEC ORAL GRANULES DEL RELEASE IN PACKET 2 GRAM	4	PA
SOVUNA ORAL TABLET 200 MG, 300 MG	4	
STROMEKTOL ORAL TABLET 3 MG	4	QL (20 per 30 days)
<i>tinidazole oral tablet 250 mg, 500 mg</i>	1	
TOBI INHALATION SOLUTION FOR NEBULIZATION 300 MG/5 ML	EX	
TOBI PODHALER INHALATION CAPSULE, W/INHALATION DEVICE 28 MG	EX	
<i>tobramycin in 0.225 % nacl inhalation solution for nebulization 300 mg/5 ml</i>	3	SP
<i>tobramycin inhalation solution for nebulization 300 mg/4 ml</i>	4	SP
<i>tobramycin sulfate injection recon soln 1.2 gram</i>	4	
TOBRAMYCIN WITH NEBULIZER INHALATION SOLUTION FOR NEBULIZATION 300 MG/5 ML	3	PA; SP
TRECTOR ORAL TABLET 250 MG	4	
XENLETA ORAL TABLET 600 MG	4	
XIFAXAN ORAL TABLET 200 MG, 550 MG	4	PA; QL (60 per 30 days)
ZYVOX ORAL SUSPENSION FOR RECONSTITUTION 100 MG/5 ML	4	
ZYVOX ORAL TABLET 600 MG	4	
PENICILLINS		
<i>amoxicillin oral capsule 250 mg, 500 mg</i>	1	

Drug Name	Tier	Requirements / Limits
<i>amoxicillin oral suspension for reconstitution 125 mg/5 ml, 200 mg/5 ml, 250 mg/5 ml, 400 mg/5 ml</i>	1	
<i>amoxicillin oral tablet 500 mg, 875 mg</i>	1	
<i>amoxicillin oral tablet, chewable 125 mg, 250 mg</i>	1	
<i>amoxicillin-pot clavulanate oral suspension for reconstitution 200-28.5 mg/5 ml, 250-62.5 mg/5 ml, 400-57 mg/5 ml, 600-42.9 mg/5 ml</i>	1	
<i>amoxicillin-pot clavulanate oral tablet 250-125 mg, 500-125 mg, 875-125 mg</i>	1	
<i>amoxicillin-pot clavulanate oral tablet extended release 12 hr 1,000-62.5 mg</i>	1	
<i>amoxicillin-pot clavulanate oral tablet, chewable 200-28.5 mg, 400-57 mg</i>	1	
<i>ampicillin oral capsule 500 mg</i>	1	
AUGMENTIN ES-600 ORAL SUSPENSION FOR RECONSTITUTION 600-42.9 MG/5 ML	EX	
AUGMENTIN ORAL SUSPENSION FOR RECONSTITUTION 125-31.25 MG/5 ML	4	
AUGMENTIN XR ORAL TABLET EXTENDED RELEASE 12 HR 1,000-62.5 MG	EX	
BICILLIN L-A INTRAMUSCULAR SYRINGE 1,200,000 UNIT/2 ML, 2,400,000 UNIT/4 ML	4	
<i>dicloxacillin oral capsule 250 mg, 500 mg</i>	1	
EXTENCILLINE INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 1.2 MILLION UNIT, 2.4 MILLION UNIT	4	
MOXATAG ORAL TABLET, ER MULTIPHASE 24 HR 775 MG	4	
<i>penicillin v potassium oral recon soln 125 mg/5 ml, 250 mg/5 ml</i>	1	
<i>penicillin v potassium oral tablet 250 mg, 500 mg</i>	1	
QUINOLONES		
BAXDELA ORAL TABLET 450 MG	EX	
CIPRO ORAL SUSPENSION, MICROCAPSULE RECON 250 MG/5 ML, 500 MG/5 ML	4	
CIPRO ORAL TABLET 250 MG, 500 MG	4	
<i>ciprofloxacin hcl oral tablet 250 mg, 500 mg, 750 mg</i>	1	
<i>ciprofloxacin oral suspension, microcapsule recon 250 mg/5 ml, 500 mg/5 ml</i>	1	

Drug Name	Tier	Requirements / Limits
<i>levofloxacin oral solution 250 mg/10 ml</i>	1	
<i>levofloxacin oral tablet 250 mg, 500 mg, 750 mg</i>	1	
<i>moxifloxacin oral tablet 400 mg</i>	1	
<i>ofloxacin oral tablet 300 mg, 400 mg</i>	1	
SULFA'S & RELATED AGENTS		
BACTRIM DS ORAL TABLET 800-160 MG	4	
BACTRIM ORAL TABLET 400-80 MG	4	
<i>sulfadiazine oral tablet 500 mg</i>	1	
<i>sulfamethoxazole-trimethoprim oral suspension 200-40 mg/5 ml</i>	1	
<i>sulfamethoxazole-trimethoprim oral tablet 400-80 mg, 800-160 mg</i>	1	
<i>sulfatrim oral suspension 200-40 mg/5 ml</i>	1	
TETRACYCLINES		
AVIDOXY DK KIT 100 MG-2 % -SPF 30	EX	
<i>avidoxy oral tablet 100 mg</i>	EX	
<i>demeclocycline oral tablet 150 mg, 300 mg</i>	1	
DORYX MPC ORAL TABLET, DELAYED RELEASE (DR/EC) 60 MG	EX	
DORYX ORAL TABLET, DELAYED RELEASE (DR/EC) 200 MG, 80 MG	EX	
<i>doxycycline hyclate oral capsule 100 mg, 50 mg</i>	1	
<i>doxycycline hyclate oral tablet 100 mg, 150 mg, 20 mg, 75 mg</i>	1	
<i>doxycycline hyclate oral tablet 50 mg</i>	EX	
<i>doxycycline hyclate oral tablet, delayed release (dr/ec) 100 mg, 150 mg, 50 mg, 75 mg</i>	1	
<i>doxycycline hyclate oral tablet, delayed release (dr/ec) 200 mg</i>	EX	
DOXYCYCLINE HYCLATE ORAL TABLET, DELAYED RELEASE (DR/EC) 80 MG	EX	
<i>doxycycline monohydrate oral capsule 100 mg, 150 mg, 50 mg, 75 mg</i>	1	
<i>doxycycline monohydrate oral capsule, ir - delay rel, biphasic 40 mg</i>	EX	
<i>doxycycline monohydrate oral suspension for reconstitution 25 mg/5 ml</i>	1	

Drug Name	Tier	Requirements / Limits
<i>doxycycline monohydrate oral tablet 100 mg, 150 mg, 50 mg, 75 mg</i>	1	
EMROSI ORAL CAPSULE,IR -EXTEND REL,BIPHASE 40 MG	EX	
<i>minocycline oral capsule 100 mg, 50 mg, 75 mg</i>	1	
MINOCYCLINE ORAL CAPSULE, EXTENDED RELEASE 24HR 135 MG, 45 MG, 90 MG	EX	
<i>minocycline oral tablet 100 mg, 50 mg, 75 mg</i>	1	
<i>minocycline oral tablet extended release 24 hr 105 mg, 115 mg, 135 mg, 45 mg, 55 mg, 65 mg, 80 mg, 90 mg</i>	EX	
<i>mondoxyne nl oral capsule 100 mg, 75 mg</i>	EX	
MORGIDOX 1X 50 KIT 50 MG	EX	
MORGIDOX 1X100 KIT 100 MG	EX	
NUZYRA ORAL TABLET 150 MG	4	
ORACEA ORAL CAPSULE, IR - DELAY REL, BIPHASE 40 MG	EX	
SEYSARA ORAL TABLET 100 MG, 150 MG, 60 MG	EX	
TARGADOX ORAL TABLET 50 MG	EX	
<i>tetracycline oral capsule 250 mg, 500 mg</i>	4	
<i>tetracycline oral tablet 250 mg, 500 mg</i>	4	
XIMINO ORAL CAPSULE, EXTENDED RELEASE 24HR 135 MG, 45 MG, 90 MG	EX	
URINARY TRACT AGENTS		
<i>fosfomycin tromethamine oral packet 3 gram</i>	4	
FURADANTIN ORAL SUSPENSION 25 MG/5 ML	4	
MACROBID ORAL CAPSULE 100 MG	4	
<i>methenamine hippurate oral tablet 1 gram</i>	1	
<i>methenamine mandelate oral tablet 0.5 gram, 1 gram</i>	1	
<i>nitrofurantoin macrocrystal oral capsule 100 mg, 25 mg, 50 mg</i>	1	
<i>nitrofurantoin monohyd/m-cryst oral capsule 100 mg</i>	1	
<i>nitrofurantoin oral suspension 25 mg/5 ml</i>	1	
NITROFURANTOIN ORAL SUSPENSION 50 MG/5 ML	EX	

Drug Name	Tier	Requirements / Limits
PRIMSOL ORAL SOLUTION 50 MG/5 ML	4	
<i>trimethoprim oral tablet 100 mg</i>	1	
VANCOMYCIN		
FIRVANQ ORAL RECON SOLN 25 MG/ML, 50 MG/ML	EX	
VANOCIN ORAL CAPSULE 125 MG, 250 MG	4	
<i>vancomycin oral capsule 125 mg, 250 mg</i>	1	
<i>vancomycin oral recon soln 25 mg/ml, 50 mg/ml</i>	1	
ANTINEOPLASTIC & IMMUNOSUPPRESSANT DRUGS		
ADJUNCTIVE AGENTS		
<i>leucovorin calcium oral tablet 10 mg, 15 mg, 25 mg, 5 mg</i>	1	
MESNEX ORAL TABLET 400 MG	4	
VISTOGARD ORAL GRANULES IN PACKET 10 GRAM	4	PA; SP
ANTINEOPLASTIC & IMMUNOSUPPRESSANT DRUGS		
<i>abiraterone oral tablet 250 mg, 500 mg</i>	3	PA; SP; OCh; LA
<i>abirtega oral tablet 250 mg</i>	4	PA; SP; OCh; LA
AFINITOR DISPERZ ORAL TABLET FOR SUSPENSION 2 MG, 3 MG, 5 MG	EX	
AFINITOR ORAL TABLET 10 MG, 2.5 MG, 5 MG, 7.5 MG	EX	
AKEEGA ORAL TABLET 100-500 MG, 50-500 MG	4	PA; SP; OCh
ALECENSA ORAL CAPSULE 150 MG	3	PA; SP; OCh; LA
ALKERAN ORAL TABLET 2 MG	4	OCh
ALUNBRIG ORAL TABLET 180 MG, 30 MG, 90 MG	4	PA; SP; OCh
ALUNBRIG ORAL TABLETS, DOSE PACK 90 MG (7)- 180 MG (23)	4	PA; SP; OCh
<i>anastrozole oral tablet 1 mg</i>	1	OCh; ACA PV
ARIMIDEX ORAL TABLET 1 MG	EX	
AROMASIN ORAL TABLET 25 MG	4	PA; OCh; QL (30 per 30 days)
ASTAGRAF XL ORAL CAPSULE, EXTENDED RELEASE 24HR 0.5 MG, 1 MG, 5 MG	EX	
AUGTYRO ORAL CAPSULE 160 MG, 40 MG	4	PA; SP; OCh; LA

Drug Name	Tier	Requirements / Limits
AVMAPKI-FAKZYNJA ORAL COMBO PACK 0.8-200 MG	4	PA; SP; OCh
AYVAKIT ORAL TABLET 100 MG, 200 MG, 25 MG, 300 MG, 50 MG	4	PA; SP; OCh
AZASAN ORAL TABLET 100 MG, 75 MG	EX	
<i>azathioprine oral tablet 100 mg, 75 mg</i>	4	
<i>azathioprine oral tablet 50 mg</i>	1	
BALVERSA ORAL TABLET 3 MG, 4 MG, 5 MG	4	PA; SP; OCh
<i>bexarotene oral capsule 75 mg</i>	3	PA; SP; OCh; LA
<i>bexarotene topical gel 1 %</i>	3	PA; SP; LA
<i>bicalutamide oral tablet 50 mg</i>	1	OCh
BOSULIF ORAL CAPSULE 100 MG, 50 MG	4	PA; SP; OCh; LA
BOSULIF ORAL TABLET 100 MG, 400 MG, 500 MG	4	PA; SP; OCh; LA
BRAFTOVI ORAL CAPSULE 75 MG	3	PA; SP; OCh; LA
BRUKINSA ORAL CAPSULE 80 MG	4	PA; SP; OCh
CABOMETYX ORAL TABLET 20 MG, 40 MG, 60 MG	4	PA; SP; OCh; LA
CALQUENCE (ACALABRUTINIB MAL) ORAL TABLET 100 MG	3	PA; SP; OCh
<i>capecitabine oral tablet 150 mg, 500 mg</i>	3	SP; OCh; LA
CAPRELSA ORAL TABLET 100 MG, 300 MG	4	PA; SP; OCh
CASODEX ORAL TABLET 50 MG	4	PA; OCh; QL (30 per 30 days)
CELLCEPT ORAL CAPSULE 250 MG	4	
CELLCEPT ORAL SUSPENSION FOR RECONSTITUTION 200 MG/ML	4	
CELLCEPT ORAL TABLET 500 MG	4	
COMETRIQ ORAL CAPSULE 100 MG/DAY (80 MG X1-20 MG X1), 140 MG/DAY (80 MG X1-20 MG X3), 60 MG/DAY (20 MG X 3/DAY)	4	PA; SP; OCh; LA
COPIKTRA ORAL CAPSULE 15 MG, 25 MG	4	PA; SP; OCh
COTELLIC ORAL TABLET 20 MG	4	PA; SP; OCh; LA
<i>cyclophosphamide oral capsule 25 mg, 50 mg</i>	4	OCh
CYCLOPHOSPHAMIDE ORAL TABLET 50 MG	4	OCh
<i>cyclosporine modified oral capsule 100 mg, 25 mg, 50 mg</i>	1	

Drug Name	Tier	Requirements / Limits
<i>cyclosporine modified oral solution 100 mg/ml</i>	1	
<i>cyclosporine oral capsule 100 mg, 25 mg</i>	1	
DANZITEN ORAL TABLET 71 MG, 95 MG	4	PA; SP; OCh
<i>dasatinib oral tablet 100 mg, 140 mg, 20 mg, 50 mg, 70 mg, 80 mg</i>	3	PA; SP; OCh; LA
DAURISMO ORAL TABLET 100 MG, 25 MG	4	PA; SP; OCh; LA
DROXIA ORAL CAPSULE 200 MG, 300 MG, 400 MG	2	
ENSACOVE ORAL CAPSULE 100 MG, 25 MG	4	PA; SP; OCh
ENSPRYNG SUBCUTANEOUS SYRINGE 120 MG/ML	4	PA; SP; LA
ENVARBUS XR ORAL TABLET EXTENDED RELEASE 24 HR 0.75 MG, 1 MG, 4 MG	EX	
ERIVEDGE ORAL CAPSULE 150 MG	4	PA; SP; OCh; LA
ERLEADA ORAL TABLET 240 MG, 60 MG	4	PA; SP; OCh; LA
<i>erlotinib oral tablet 100 mg, 150 mg, 25 mg</i>	3	PA; SP; OCh; LA
<i>etoposide oral capsule 50 mg</i>	1	OCh
EULEXIN ORAL CAPSULE 125 MG	4	PA; OCh; QL (180 per 30 days)
<i>everolimus (antineoplastic) oral tablet 10 mg</i>	3	PA; SP; OCh; LA
<i>everolimus (antineoplastic) oral tablet 2.5 mg, 5 mg, 7.5 mg</i>	4	PA; SP; OCh; LA
<i>everolimus (antineoplastic) oral tablet for suspension 2 mg, 3 mg, 5 mg</i>	3	PA; SP; OCh; LA
<i>everolimus (immunosuppressive) oral tablet 0.25 mg, 0.5 mg, 0.75 mg, 1 mg</i>	1	PA
<i>exemestane oral tablet 25 mg</i>	1	OCh; ACA PV
FARESTON ORAL TABLET 60 MG	4	PA; OCh; QL (30 per 30 days)
FEMARA ORAL TABLET 2.5 MG	4	PA; OCh; QL (30 per 30 days)
FOTIVDA ORAL CAPSULE 0.89 MG	4	PA; SP; OCh; QL (33 per 30 days)
FOTIVDA ORAL CAPSULE 1.34 MG	4	PA; SP; OCh; QL (22 per 30 days)
FRUZAQLA ORAL CAPSULE 1 MG, 5 MG	4	PA; SP; OCh
GAVRETO ORAL CAPSULE 100 MG	4	PA; SP; OCh; QL (120 per 30 days)
<i>gefitinib oral tablet 250 mg</i>	3	PA; SP; OCh
<i>gengraf oral capsule 100 mg, 25 mg</i>	1	
<i>gengraf oral solution 100 mg/ml</i>	1	
GILOTRIF ORAL TABLET 20 MG, 30 MG, 40 MG	3	PA; SP; OCh; LA

Drug Name	Tier	Requirements / Limits
GLEEVEC ORAL TABLET 100 MG, 400 MG	EX	
GLEOSTINE ORAL CAPSULE 10 MG, 100 MG, 40 MG	2	PA; OCh
GOMEKLI ORAL CAPSULE 1 MG, 2 MG	4	PA; SP; OCh
GOMEKLI ORAL TABLET FOR SUSPENSION 1 MG	4	PA; SP; OCh
HYCAMTIN ORAL CAPSULE 0.25 MG	3	SP; OCh; LA
HYCAMTIN ORAL CAPSULE 1 MG	3	SP; OCh; LA
HYDREA ORAL CAPSULE 500 MG	4	OCh
<i>hydroxyurea oral capsule 500 mg</i>	1	OCh
IBRANCE ORAL CAPSULE 100 MG, 125 MG, 75 MG	4	PA; SP; OCh; LA
IBRANCE ORAL TABLET 100 MG, 125 MG, 75 MG	4	PA; SP; OCh; LA
IBTROZI ORAL CAPSULE 200 MG	4	PA; SP; OCh; QL (90 per 30 days)
ICLUSIG ORAL TABLET 10 MG, 15 MG, 30 MG, 45 MG	4	PA; SP; OCh
IDHIFA ORAL TABLET 100 MG, 50 MG	4	PA; SP; OCh; LA
<i>imatinib oral tablet 100 mg, 400 mg</i>	3	PA; SP; OCh; LA
IMBRUVICA ORAL CAPSULE 140 MG, 70 MG	3	PA; SP; OCh
IMBRUVICA ORAL SUSPENSION 70 MG/ML	3	PA; SP; OCh
IMBRUVICA ORAL TABLET 140 MG, 280 MG, 420 MG	3	PA; SP; OCh
IMKELDI ORAL SOLUTION 80 MG/ML	4	PA; SP; OCh; LA
IMURAN ORAL TABLET 50 MG	4	
INLYTA ORAL TABLET 1 MG, 5 MG	4	PA; SP; OCh; LA
INQOVI ORAL TABLET 35-100 MG	4	PA; SP; OCh; LA
INREBIC ORAL CAPSULE 100 MG	4	PA; SP; OCh; LA
IRESSA ORAL TABLET 250 MG	EX	
ITOVEBI ORAL TABLET 3 MG, 9 MG	4	PA; SP; OCh; LA
IWILFIN ORAL TABLET 192 MG	4	PA; SP; OCh
JAKAFI ORAL TABLET 10 MG, 15 MG, 20 MG, 25 MG, 5 MG	4	PA; SP; OCh; LA
JAYPIRCA ORAL TABLET 100 MG, 50 MG	4	PA; SP; OCh; LA
JYLAMVO ORAL SOLUTION 2 MG/ML	EX	
KISQALI ORAL TABLET 200 MG/DAY (200 MG X 1), 400 MG/DAY (200 MG X 2), 600 MG/DAY (200 MG X 3)	3	PA; SP; OCh; LA

Drug Name	Tier	Requirements / Limits
KLISYRI (250 MG) TOPICAL OINTMENT IN PACKET 1 %	4	PA
KOSELUGO ORAL CAPSULE 10 MG, 25 MG	4	PA; SP; OCh
KRAZATI ORAL TABLET 200 MG	4	PA; SP; OCh
<i>lanreotide subcutaneous syringe 120 mg/0.5 ml</i>	EX	
<i>lapatinib oral tablet 250 mg</i>	4	PA; SP; OCh; LA; QL (180 per 30 days)
LAZCLUZE ORAL TABLET 240 MG, 80 MG	4	PA; SP; OCh
<i>lenalidomide oral capsule 10 mg, 15 mg, 2.5 mg, 20 mg, 25 mg, 5 mg</i>	3	PA; SP; OCh; LA
LENVIMA ORAL CAPSULE 10 MG/DAY (10 MG X 1), 12 MG/DAY (4 MG X 3), 14 MG/DAY (10 MG X 1-4 MG X 1), 18 MG/DAY (10 MG X 1-4 MG X 2), 20 MG/DAY (10 MG X 2), 24 MG/DAY (10 MG X 2-4 MG X 1), 4 MG, 8 MG/DAY (4 MG X 2)	4	PA; SP; OCh; LA
<i>letrozole oral tablet 2.5 mg</i>	1	OCh; ACA PV
LEUKERAN ORAL TABLET 2 MG	2	PA; OCh; QL (150 per 30 days)
<i>leuprolide subcutaneous kit 1 mg/0.2 ml</i>	3	PA; SP; LA
LONSURF ORAL TABLET 15-6.14 MG, 20-8.19 MG	4	PA; SP; OCh; LA
LORBRENA ORAL TABLET 100 MG, 25 MG	4	PA; SP; OCh; LA
LUMAKRAS ORAL TABLET 120 MG	4	PA; SP; OCh; LA; QL (240 per 30 days)
LUMAKRAS ORAL TABLET 240 MG	4	PA; SP; OCh; LA; QL (120 per 30 days)
LUMAKRAS ORAL TABLET 320 MG	4	PA; SP; OCh; LA; QL (90 per 30 days)
LUPKYNIS ORAL CAPSULE 7.9 MG	4	PA; SP; QL (180 per 30 days)
LYNPARZA ORAL TABLET 100 MG, 150 MG	3	PA; SP; OCh; LA
LYSODREN ORAL TABLET 500 MG	3	PA; SP; OCh
LYTGOBI ORAL TABLET 12 MG/DAY (4 MG X 3), 16 MG/DAY (4 MG X 4), 20 MG/DAY (4 MG X 5)	4	PA; SP; OCh
MATULANE ORAL CAPSULE 50 MG	4	PA; SP; OCh
<i>megestrol oral suspension 400 mg/10 ml (40 mg/ml), 625 mg/5 ml (125 mg/ml)</i>	1	
<i>megestrol oral tablet 20 mg, 40 mg</i>	1	OCh
MEKINIST ORAL RECON SOLN 0.05 MG/ML	3	PA; SP; OCh; LA

Drug Name	Tier	Requirements / Limits
MEKINIST ORAL TABLET 0.5 MG, 2 MG	3	PA; SP; OCh; LA
MEKTOVI ORAL TABLET 15 MG	3	PA; SP; OCh; LA
<i>mercaptopurine oral suspension 20 mg/ml</i>	4	SP; OCh; LA
<i>mercaptopurine oral tablet 50 mg</i>	1	OCh
<i>methotrexate sodium (pf) injection solution 25 mg/ml</i>	1	
<i>methotrexate sodium injection solution 25 mg/ml</i>	1	
<i>methotrexate sodium oral tablet 2.5 mg</i>	1	OCh
MYCAPSSA ORAL CAPSULE, DELAYED RELEASE(DR/EC) 20 MG	4	PA; SP; QL (120 per 30 days)
<i>mycophenolate mofetil oral capsule 250 mg</i>	1	
<i>mycophenolate mofetil oral suspension for reconstitution 200 mg/ml</i>	1	
<i>mycophenolate mofetil oral tablet 500 mg</i>	1	
<i>mycophenolate sodium oral tablet, delayed release (dr/ec) 180 mg, 360 mg</i>	1	
MYFORTIC ORAL TABLET, DELAYED RELEASE (DR/EC) 180 MG, 360 MG	4	
MYHIBBIN ORAL SUSPENSION 200 MG/ML	4	PA
MYLERAN ORAL TABLET 2 MG	2	OCh
NEMLUVIO SUBCUTANEOUS PEN INJECTOR 30 MG	4	PA; SP; LA; QL (2 per 30 days)
NEORAL ORAL CAPSULE 100 MG, 25 MG	4	
NEORAL ORAL SOLUTION 100 MG/ML	4	
NERLYNX ORAL TABLET 40 MG	4	PA; SP; OCh; LA; QL (180 per 30 days)
NEXAVAR ORAL TABLET 200 MG	EX	
NILANDRON ORAL TABLET 150 MG	4	PA; OCh; QL (30 per 30 days)
<i>nilotinib hcl oral capsule 50 mg</i>	4	PA; SP; OCh
<i>nilutamide oral tablet 150 mg</i>	4	PA; OCh; QL (30 per 30 days)
NINLARO ORAL CAPSULE 2.3 MG, 3 MG, 4 MG	4	PA; SP; OCh; LA
NUBEQA ORAL TABLET 300 MG	4	PA; SP; OCh; LA
<i>octreotide acetate injection solution 1,000 mcg/ml, 100 mcg/ml, 200 mcg/ml, 50 mcg/ml, 500 mcg/ml</i>	3	PA; SP; LA
<i>octreotide acetate injection syringe 100 mcg/ml (1 ml), 50 mcg/ml (1 ml), 500 mcg/ml (1 ml)</i>	3	PA; SP; LA

Drug Name	Tier	Requirements / Limits
ODOMZO ORAL CAPSULE 200 MG	4	PA; SP; OCh; LA; QL (30 per 30 days)
OGSIVEO ORAL TABLET 100 MG, 150 MG, 50 MG	4	PA; SP; OCh
OJEMDA ORAL SUSPENSION FOR RECONSTITUTION 25 MG/ML	4	PA; SP; OCh
OJEMDA ORAL TABLET 400 MG/WEEK (100 MG X 4), 500 MG/WEEK (100 MG X 5), 600 MG/WEEK (100 MG X 6)	4	PA; SP; OCh
OJJAARA ORAL TABLET 100 MG, 150 MG, 200 MG	4	PA; SP; OCh; QL (30 per 30 days)
ONUREG ORAL TABLET 200 MG	4	PA; SP; OCh; LA; QL (21 per 30 days)
ONUREG ORAL TABLET 300 MG	4	PA; SP; OCh; LA; QL (14 per 30 days)
ORGOVYX ORAL TABLET 120 MG	4	PA; SP; OCh
ORSERDU ORAL TABLET 345 MG, 86 MG	4	PA; SP; OCh
<i>pazopanib oral tablet 200 mg</i>	4	PA; SP; OCh; LA
PEMAZYRE ORAL TABLET 13.5 MG, 4.5 MG, 9 MG	4	PA; SP; OCh; QL (28 per 30 days)
PIQRAY ORAL TABLET 200 MG/DAY (200 MG X 1), 250 MG/DAY (200 MG X1-50 MG X1), 300 MG/DAY (150 MG X 2)	3	PA; SP; OCh
POMALYST ORAL CAPSULE 1 MG, 2 MG, 3 MG, 4 MG	4	PA; SP; OCh; LA
PROGRAF ORAL CAPSULE 0.5 MG, 1 MG, 5 MG	4	
PROGRAF ORAL GRANULES IN PACKET 0.2 MG, 1 MG	4	
PURIXAN ORAL SUSPENSION 20 MG/ML	4	PA; SP; OCh
QINLOCK ORAL TABLET 50 MG	3	PA; SP; OCh; QL (90 per 30 days)
RETEVMO ORAL TABLET 120 MG, 160 MG, 40 MG, 80 MG	4	PA; SP; OCh; LA; QL (60 per 30 days)
REVLIMID ORAL CAPSULE 10 MG, 15 MG, 2.5 MG, 20 MG, 25 MG, 5 MG	3	PA; SP; OCh; LA
REVUFORJ ORAL TABLET 110 MG, 160 MG	4	PA; SP; OCh
REVUFORJ ORAL TABLET 25 MG	3	PA; SP; OCh
REZLIDHIA ORAL CAPSULE 150 MG	4	PA; SP; OCh
REZUROCK ORAL TABLET 200 MG	4	PA

Drug Name	Tier	Requirements / Limits
ROMVIMZA ORAL CAPSULE 14 MG, 20 MG, 30 MG	4	PA; SP; OCh
ROZLYTREK ORAL CAPSULE 100 MG, 200 MG	4	PA; SP; OCh; LA
ROZLYTREK ORAL PELLETS IN PACKET 50 MG	4	PA; SP; OCh; LA
RUBRACA ORAL TABLET 200 MG, 250 MG, 300 MG	4	PA; SP; OCh; LA
RYDAPT ORAL CAPSULE 25 MG	4	PA; SP; OCh; LA
SANDIMMUNE ORAL CAPSULE 100 MG, 25 MG	4	
SANDOSTATIN INJECTION SOLUTION 100 MCG/ML, 50 MCG/ML, 500 MCG/ML	EX	
SCSEMBLIX ORAL TABLET 100 MG, 20 MG, 40 MG	4	PA; SP; OCh
SIGNIFOR SUBCUTANEOUS SOLUTION 0.3 MG/ML (1 ML), 0.6 MG/ML (1 ML), 0.9 MG/ML (1 ML)	4	PA; SP
SIKLOS ORAL TABLET 1,000 MG, 100 MG	EX	
<i>sirolimus oral solution 1 mg/ml</i>	1	
<i>sirolimus oral tablet 0.5 mg, 1 mg, 2 mg</i>	1	
SOLTAMOX ORAL SOLUTION 20 MG/10 ML	4	OCh; ACA PV
SOMATULINE DEPOT SUBCUTANEOUS SYRINGE 120 MG/0.5 ML, 60 MG/0.2 ML, 90 MG/0.3 ML	3	PA; SP; LA
<i>sorafenib oral tablet 200 mg</i>	4	PA; SP; OCh; LA
SPRYCEL ORAL TABLET 100 MG, 140 MG, 20 MG, 50 MG, 70 MG, 80 MG	EX	
STIVARGA ORAL TABLET 40 MG	4	PA; SP; OCh; LA
<i>sunitinib malate oral capsule 12.5 mg, 25 mg, 37.5 mg, 50 mg</i>	3	PA; SP; OCh; LA
SUTENT ORAL CAPSULE 12.5 MG, 25 MG, 37.5 MG, 50 MG	EX	
TABLOID ORAL TABLET 40 MG	2	PA; OCh
TABRECTA ORAL TABLET 150 MG, 200 MG	4	PA; SP; OCh; LA; QL (168 per 30 days)
<i>tacrolimus oral capsule 0.5 mg, 1 mg, 5 mg</i>	1	
TAFINLAR ORAL CAPSULE 50 MG, 75 MG	3	PA; SP; OCh; LA
TAFINLAR ORAL TABLET FOR SUSPENSION 10 MG	3	PA; SP; OCh; LA

Drug Name	Tier	Requirements / Limits
TAGRISSE ORAL TABLET 40 MG, 80 MG	3	PA; SP; OCh; LA
TALZENNA ORAL CAPSULE 0.1 MG, 0.25 MG, 0.35 MG, 0.5 MG, 0.75 MG, 1 MG	4	PA; SP; OCh; LA
<i>tamoxifen oral tablet 10 mg, 20 mg</i>	1	OCh; ACA PV
TARGRETIN ORAL CAPSULE 75 MG	EX	
TARGRETIN TOPICAL GEL 1 %	EX	
TASIGNA ORAL CAPSULE 150 MG, 200 MG, 50 MG	4	PA; SP; OCh; LA
TAZVERIK ORAL TABLET 200 MG	4	PA; SP; OCh
<i>temozolomide oral capsule 100 mg, 140 mg, 180 mg, 20 mg, 250 mg, 5 mg</i>	3	PA; SP; OCh; LA
TEPMETKO ORAL TABLET 225 MG	4	PA; SP; OCh; QL (60 per 30 days)
THALOMID ORAL CAPSULE 100 MG, 50 MG	3	PA; SP; OCh; LA
TIBSOVO ORAL TABLET 250 MG	4	PA; SP; OCh
<i>toremifene oral tablet 60 mg</i>	1	OCh
<i>torpenz oral tablet 10 mg, 2.5 mg, 5 mg, 7.5 mg</i>	4	PA; SP; OCh
<i>tretinoin (antineoplastic) oral capsule 10 mg</i>	1	OCh
TREXALL ORAL TABLET 10 MG, 15 MG, 5 MG, 7.5 MG	4	PA; OCh; QL (15 per 30 days)
TRUQAP ORAL TABLET 160 MG, 200 MG	4	PA; SP; OCh
TUKYSA ORAL TABLET 150 MG, 50 MG	4	PA; SP; OCh; QL (120 per 30 days)
TURALIO ORAL CAPSULE 125 MG	4	PA; SP; OCh
TYKERB ORAL TABLET 250 MG	EX	
VANFLYTA ORAL TABLET 17.7 MG, 26.5 MG	4	PA; SP; OCh
VENCLEXTA ORAL TABLET 10 MG, 100 MG, 50 MG	4	PA; SP; OCh
VENCLEXTA STARTING PACK ORAL TABLETS, DOSE PACK 10 MG-50 MG- 100 MG	4	PA; SP; OCh
VERZENIO ORAL TABLET 100 MG, 150 MG, 200 MG, 50 MG	3	PA; SP; OCh; LA
VIJOICE ORAL GRANULES IN PACKET 50 MG	4	PA; SP
VIJOICE ORAL TABLET 125 MG, 250 MG/DAY (200 MG X1-50 MG X1), 50 MG	4	PA; SP
VITRAKVI ORAL CAPSULE 100 MG, 25 MG	4	PA; SP; OCh; LA
VITRAKVI ORAL SOLUTION 20 MG/ML	4	PA; SP; OCh; LA

Drug Name	Tier	Requirements / Limits
VIZIMPRO ORAL TABLET 15 MG, 30 MG, 45 MG	EX	
VONJO ORAL CAPSULE 100 MG	4	PA; SP; OCh
VORANIGO ORAL TABLET 10 MG, 40 MG	4	PA; SP; OCh
VOTRIENT ORAL TABLET 200 MG	EX	
WELIREG ORAL TABLET 40 MG	4	PA; SP; OCh; QL (90 per 30 days)
XALKORI ORAL CAPSULE 200 MG, 250 MG	3	PA; SP; OCh; LA
XALKORI ORAL PELLETT 150 MG, 20 MG, 50 MG	3	PA; SP; OCh; LA
XATMEP ORAL SOLUTION 2.5 MG/ML	EX	
XELODA ORAL TABLET 150 MG, 500 MG	EX	
XERMELO ORAL TABLET 250 MG	4	PA; SP
XOSPATA ORAL TABLET 40 MG	4	PA; SP; OCh
XPOVIO ORAL TABLET 100 MG/WEEK (50 MG X 2), 40 MG/WEEK (10 MG X 4), 40 MG/WEEK (40 MG X 1), 40MG TWICE WEEK (40 MG X 2), 60 MG/WEEK (60 MG X 1), 60MG TWICE WEEK (120 MG/WEEK), 80 MG/WEEK (40 MG X 2), 80MG TWICE WEEK (160 MG/WEEK)	4	PA; SP; OCh
XROMI ORAL SOLUTION 100 MG/ML	4	PA
XTANDI ORAL CAPSULE 40 MG	3	PA; SP; OCh; LA
XTANDI ORAL TABLET 40 MG, 80 MG	3	PA; SP; OCh; LA
YONSA ORAL TABLET 125 MG	3	PA; SP; OCh; LA
ZEJULA ORAL TABLET 100 MG, 200 MG, 300 MG	4	PA; SP; OCh; LA
ZELBORAF ORAL TABLET 240 MG	4	PA; SP; OCh; LA
ZOLINZA ORAL CAPSULE 100 MG	4	PA; SP; OCh; LA
ZORTRESS ORAL TABLET 0.25 MG, 0.5 MG, 0.75 MG, 1 MG	4	PA
ZYDELIG ORAL TABLET 100 MG, 150 MG	4	PA; SP; OCh; LA; QL (30 per 30 days)
ZYKADIA ORAL TABLET 150 MG	4	PA; SP; OCh; LA
ZYTIGA ORAL TABLET 250 MG, 500 MG	EX	
AUTONOMIC & CNS DRUGS, NEUROLOGY & PSYCH		
ANTICONVULSANTS		
APTIOM ORAL TABLET 200 MG, 400 MG, 600 MG, 800 MG	EX	

Drug Name	Tier	Requirements / Limits
BANZEL ORAL SUSPENSION 40 MG/ML	EX	
BANZEL ORAL TABLET 200 MG, 400 MG	EX	
BRIVIACT ORAL SOLUTION 10 MG/ML	4	PA; QL (2 per 30 days)
BRIVIACT ORAL TABLET 10 MG, 100 MG, 25 MG, 50 MG, 75 MG	4	PA; QL (60 per 30 days)
<i>carbamazepine oral capsule, er multiphase 12 hr 100 mg, 200 mg, 300 mg</i>	1	
<i>carbamazepine oral suspension 100 mg/5 ml, 200 mg/10 ml</i>	1	PA; QL (240 per 30 days)
<i>carbamazepine oral tablet 200 mg</i>	1	PA; QL (240 per 30 days)
<i>carbamazepine oral tablet extended release 12 hr 100 mg, 200 mg, 400 mg</i>	1	
<i>carbamazepine oral tablet, chewable 100 mg</i>	1	PA; QL (240 per 30 days)
CARBAMAZEPINE ORAL TABLET, CHEWABLE 200 MG	EX	
CARBATROL ORAL CAPSULE, ER MULTIPHASE 12 HR 100 MG, 200 MG, 300 MG	4	PA; QL (180 per 30 days)
CELONTIN ORAL CAPSULE 300 MG	4	PA; QL (120 per 30 days)
<i>clobazam oral suspension 2.5 mg/ml</i>	4	
<i>clobazam oral tablet 10 mg, 20 mg</i>	4	
<i>clonazepam oral tablet 0.5 mg, 1 mg, 2 mg</i>	1	
<i>clonazepam oral tablet, disintegrating 0.125 mg, 0.25 mg, 0.5 mg, 1 mg, 2 mg</i>	1	
DEPAKOTE ER ORAL TABLET EXTENDED RELEASE 24 HR 250 MG, 500 MG	4	PA; QL (60 per 30 days)
DEPAKOTE ORAL TABLET, DELAYED RELEASE (DR/EC) 125 MG, 250 MG, 500 MG	4	PA; QL (60 per 30 days)
DEPAKOTE SPRINKLES ORAL CAPSULE, DELAYED REL SPRINKLE 125 MG	4	PA; QL (240 per 30 days)
DIACOMIT ORAL CAPSULE 250 MG, 500 MG	4	PA; SP
DIACOMIT ORAL POWDER IN PACKET 250 MG, 500 MG	4	PA; SP
<i>diazepam rectal kit 12.5-15-17.5-20 mg, 2.5 mg, 5-7.5-10 mg</i>	1	
DILANTIN EXTENDED ORAL CAPSULE 100 MG	2	PA; QL (210 per 30 days)
DILANTIN INFATABS ORAL TABLET, CHEWABLE 50 MG	4	PA; QL (390 per 30 days)

Drug Name	Tier	Requirements / Limits
DILANTIN ORAL CAPSULE 30 MG	2	PA; QL (210 per 30 days)
DILANTIN-125 ORAL SUSPENSION 125 MG/5 ML	2	PA; QL (390 per 30 days)
<i>divalproex oral capsule, delayed rel sprinkle 125 mg</i>	1	
<i>divalproex oral tablet extended release 24 hr 250 mg, 500 mg</i>	1	
<i>divalproex oral tablet, delayed release (dr/ec) 125 mg, 250 mg, 500 mg</i>	1	
ELEPSIA XR ORAL TABLET EXTENDED RELEASE 24 HR 1, 000 MG, 1, 500 MG	4	PA; QL (60 per 30 days)
EPIDIOLEX ORAL SOLUTION 100 MG/ML	4	PA; SP; LA; QL (400 per 30 days)
<i>epitol oral tablet 200 mg</i>	1	
EPRONTIA ORAL SOLUTION 25 MG/ML	4	PA; QL (2 per 30 days)
EQUETRO ORAL CAPSULE, ER MULTIPHASE 12 HR 100 MG, 200 MG, 300 MG	4	PA; QL (180 per 30 days)
<i>eslicarbazepine oral tablet 200 mg, 400 mg, 600 mg, 800 mg</i>	EX	
<i>ethosuximide oral capsule 250 mg</i>	1	
<i>ethosuximide oral solution 250 mg/5 ml</i>	1	
<i>felbamate oral suspension 600 mg/5 ml</i>	1	
<i>felbamate oral tablet 400 mg, 600 mg</i>	1	
FELBATOL ORAL TABLET 400 MG, 600 MG	4	PA; QL (180 per 30 days)
FINTEPLA ORAL SOLUTION 2.2 MG/ML	4	PA; SP; QL (210 per 30 days)
FYCOMPA ORAL SUSPENSION 0.5 MG/ML	4	PA; QL (2 per 30 days)
FYCOMPA ORAL TABLET 10 MG, 12 MG, 2 MG, 4 MG, 6 MG, 8 MG	4	PA; QL (30 per 30 days)
<i>gabapentin oral capsule 100 mg, 300 mg, 400 mg</i>	1	
<i>gabapentin oral solution 250 mg/5 ml, 300 mg/6 ml (6 ml)</i>	1	
<i>gabapentin oral tablet 600 mg, 800 mg</i>	1	
<i>gabapentin oral tablet extended release 24 hr 300 mg, 600 mg</i>	4	PA
GABARONE ORAL TABLET 100 MG, 400 MG	EX	
GRALISE ORAL TABLET EXTENDED RELEASE 24 HR 300 MG, 600 MG	EX	
GRALISE ORAL TABLET EXTENDED RELEASE 24 HR 450 MG, 750 MG, 900 MG	4	PA

Drug Name	Tier	Requirements / Limits
KEPPRA ORAL SOLUTION 100 MG/ML	EX	
KEPPRA ORAL TABLET 1,000 MG, 250 MG, 500 MG, 750 MG	EX	
KEPPRA XR ORAL TABLET EXTENDED RELEASE 24 HR 500 MG, 750 MG	EX	
KLONOPIN ORAL TABLET 0.5 MG, 1 MG, 2 MG	EX	
<i>lacosamide oral solution 10 mg/ml</i>	4	
<i>lacosamide oral tablet 100 mg, 150 mg, 200 mg, 50 mg</i>	4	
LAMICTAL ODT ORAL TABLET, DISINTEGRATING 100 MG, 200 MG, 25 MG, 50 MG	EX	
LAMICTAL ODT STARTER (BLUE) ORAL TABLET DISINTEGRATING, DOSE PK 25 MG (21) -50 MG (7)	EX	
LAMICTAL ODT STARTER (GREEN) ORAL TABLET DISINTEGRATING, DOSE PK 50 MG (42) -100 MG (14)	EX	
LAMICTAL ODT STARTER (ORANGE) ORAL TABLET DISINTEGRATING, DOSE PK 25 MG(14)-50 MG (14)-100 MG (7)	EX	
LAMICTAL ORAL TABLET 100 MG, 150 MG, 200 MG, 25 MG	EX	
LAMICTAL ORAL TABLET, CHEWABLE DISPERSIBLE 25 MG, 5 MG	EX	
LAMICTAL STARTER (BLUE) KIT ORAL TABLETS, DOSE PACK 25 MG (35)	EX	
LAMICTAL STARTER (GREEN) KIT ORAL TABLETS, DOSE PACK 25 MG (84) -100 MG (14)	EX	
LAMICTAL STARTER (ORANGE) KIT ORAL TABLETS, DOSE PACK 25 MG (42) -100 MG (7)	EX	
LAMICTAL XR ORAL TABLET EXTENDED RELEASE 24HR 100 MG, 200 MG, 25 MG, 250 MG, 300 MG, 50 MG	EX	
LAMICTAL XR STARTER (BLUE) ORAL TABLET EXTENDED REL, DOSE PACK 25 MG (21) -50 MG (7)	EX	

Drug Name	Tier	Requirements / Limits
LAMICTAL XR STARTER (GREEN) ORAL TABLET EXTENDED REL, DOSE PACK 50 MG(14)-100MG (14)-200 MG (7)	EX	
LAMICTAL XR STARTER (ORANGE) ORAL TABLET EXTENDED REL, DOSE PACK 25MG (14)-50 MG (14)-100MG (7)	EX	
<i>lamotrigine oral tablet 100 mg, 150 mg, 200 mg, 25 mg</i>	1	
<i>lamotrigine oral tablet disintegrating, dose pk 25 mg (21) -50 mg (7), 25 mg(14)-50 mg (14)-100 mg (7), 50 mg (42) -100 mg (14)</i>	1	
<i>lamotrigine oral tablet extended release 24hr 100 mg, 200 mg, 25 mg, 250 mg, 300 mg, 50 mg</i>	1	
<i>lamotrigine oral tablet, chewable dispersible 25 mg, 5 mg</i>	1	
<i>lamotrigine oral tablet, disintegrating 100 mg, 200 mg, 25 mg, 50 mg</i>	1	
<i>lamotrigine oral tablets, dose pack 25 mg (35), 25 mg (42) -100 mg (7), 25 mg (84) -100 mg (14)</i>	1	
<i>levetiracetam oral solution 100 mg/ml, 500 mg/5 ml (5 ml)</i>	1	PA; QL (360 per 30 days)
<i>levetiracetam oral tablet 1,000 mg, 250 mg, 500 mg, 750 mg</i>	1	PA; QL (360 per 30 days)
<i>levetiracetam oral tablet extended release 24 hr 500 mg, 750 mg</i>	1	PA; QL (360 per 30 days)
LEVETIRACETAM ORAL TABLET FOR SUSPENSION 250 MG	4	PA; QL (360 per 30 days)
LYRICA CR ORAL TABLET EXTENDED RELEASE 24 HR 165 MG, 330 MG, 82.5 MG	EX	
LYRICA ORAL CAPSULE 100 MG, 150 MG, 200 MG, 225 MG, 25 MG, 300 MG, 50 MG, 75 MG	EX	
LYRICA ORAL SOLUTION 20 MG/ML	EX	
<i>methsuximide oral capsule 300 mg</i>	4	
MOTPOLY XR ORAL CAPSULE, EXTENDED RELEASE 24HR 100 MG	4	PA; QL (120 per 30 days)
MOTPOLY XR ORAL CAPSULE, EXTENDED RELEASE 24HR 150 MG, 200 MG	4	PA; QL (60 per 30 days)
MYSOLINE ORAL TABLET 250 MG, 50 MG	4	PA; QL (240 per 30 days)
NAYZILAM NASAL SPRAY, NON-AEROSOL 5 MG/SPRAY (0.1 ML)	2	

Drug Name	Tier	Requirements / Limits
NEURONTIN ORAL CAPSULE 100 MG, 300 MG, 400 MG	EX	
NEURONTIN ORAL SOLUTION 250 MG/5 ML	EX	
NEURONTIN ORAL TABLET 600 MG, 800 MG	EX	
ONFI ORAL SUSPENSION 2.5 MG/ML	4	PA; QL (60 per 30 days)
ONFI ORAL TABLET 10 MG, 20 MG	4	PA; QL (60 per 30 days)
<i>oxcarbazepine oral suspension 300 mg/5 ml (60 mg/ml)</i>	1	
<i>oxcarbazepine oral tablet 150 mg, 300 mg, 600 mg</i>	1	
<i>oxcarbazepine oral tablet extended release 24 hr 150 mg</i>	4	PA; QL (480 per 30 days)
<i>oxcarbazepine oral tablet extended release 24 hr 300 mg</i>	4	PA; QL (240 per 30 days)
<i>oxcarbazepine oral tablet extended release 24 hr 600 mg</i>	4	PA; QL (120 per 30 days)
OXTELLAR XR ORAL TABLET EXTENDED RELEASE 24 HR 150 MG	4	PA; QL (480 per 30 days)
OXTELLAR XR ORAL TABLET EXTENDED RELEASE 24 HR 300 MG	4	PA; QL (240 per 30 days)
OXTELLAR XR ORAL TABLET EXTENDED RELEASE 24 HR 600 MG	4	PA; QL (120 per 30 days)
<i>perampanel oral tablet 10 mg, 12 mg, 2 mg, 4 mg, 6 mg, 8 mg</i>	4	PA
<i>phenobarbital oral elixir 20 mg/5 ml (4 mg/ml)</i>	1	
<i>phenobarbital oral tablet 100 mg, 15 mg, 16.2 mg, 30 mg, 32.4 mg, 60 mg, 64.8 mg, 97.2 mg</i>	1	
PHENYTEK ORAL CAPSULE 200 MG, 300 MG	4	PA; QL (90 per 30 days)
<i>phenytoin oral suspension 125 mg/5 ml</i>	1	
<i>phenytoin oral tablet, chewable 50 mg</i>	1	
<i>phenytoin sodium extended oral capsule 100 mg, 200 mg, 300 mg</i>	1	
<i>pregabalin oral capsule 100 mg, 150 mg, 200 mg, 225 mg, 25 mg, 300 mg, 50 mg, 75 mg</i>	1	
<i>pregabalin oral solution 20 mg/ml</i>	4	
<i>pregabalin oral tablet extended release 24 hr 165 mg, 330 mg, 82.5 mg</i>	4	
PRIMIDONE ORAL TABLET 125 MG	4	PA; QL (720 per 30 days)
<i>primidone oral tablet 250 mg, 50 mg</i>	1	PA; QL (720 per 30 days)
<i>roweepra oral tablet 500 mg</i>	1	

Drug Name	Tier	Requirements / Limits
<i>rufinamide oral suspension 40 mg/ml</i>	4	PA
<i>rufinamide oral tablet 200 mg, 400 mg</i>	4	PA
SABRIL ORAL POWDER IN PACKET 500 MG	EX	
SABRIL ORAL TABLET 500 MG	EX	
SPRITAM ORAL TABLET FOR SUSPENSION 1, 000 MG	4	PA; QL (90 per 30 days)
SPRITAM ORAL TABLET FOR SUSPENSION 250 MG	4	PA; QL (360 per 30 days)
SPRITAM ORAL TABLET FOR SUSPENSION 500 MG	4	PA; QL (180 per 30 days)
SPRITAM ORAL TABLET FOR SUSPENSION 750 MG	4	PA; QL (120 per 30 days)
<i>subvenite oral tablet 100 mg, 150 mg, 200 mg, 25 mg</i>	4	
<i>subvenite starter (blue) kit oral tablets, dose pack 25 mg (35)</i>	4	
<i>subvenite starter (green) kit oral tablets, dose pack 25 mg (84) -100 mg (14)</i>	4	
<i>subvenite starter (orange) kit oral tablets, dose pack 25 mg (42) -100 mg (7)</i>	4	
SYMPAZAN ORAL FILM 10 MG	4	PA; QL (120 per 30 days)
SYMPAZAN ORAL FILM 20 MG	4	PA; QL (60 per 30 days)
SYMPAZAN ORAL FILM 5 MG	4	PA; QL (240 per 30 days)
TEGRETOL ORAL SUSPENSION 100 MG/5 ML	4	PA; QL (240 per 30 days)
TEGRETOL ORAL TABLET 200 MG	4	PA; QL (240 per 30 days)
TEGRETOL XR ORAL TABLET EXTENDED RELEASE 12 HR 100 MG, 200 MG, 400 MG	4	PA; QL (120 per 30 days)
<i>tiagabine oral tablet 12 mg, 16 mg, 2 mg, 4 mg</i>	1	
TOPAMAX ORAL CAPSULE, SPRINKLE 15 MG, 25 MG	EX	
TOPAMAX ORAL TABLET 100 MG, 200 MG, 25 MG, 50 MG	EX	
<i>topiramate oral capsule, sprinkle 15 mg, 25 mg</i>	1	PA; QL (240 per 30 days)
TOPIRAMATE ORAL CAPSULE, SPRINKLE 50 MG	EX	
<i>topiramate oral capsule, extended release 24hr 100 mg, 200 mg, 25 mg, 50 mg</i>	4	

Drug Name	Tier	Requirements / Limits
<i>topiramate oral capsule, sprinkle, er 24hr 100 mg, 150 mg, 200 mg, 25 mg, 50 mg</i>	4	
<i>topiramate oral tablet 100 mg, 200 mg, 25 mg, 50 mg</i>	1	PA; QL (240 per 30 days)
TRILEPTAL ORAL SUSPENSION 300 MG/5 ML (60 MG/ML)	EX	
TRILEPTAL ORAL TABLET 150 MG, 300 MG, 600 MG	EX	
TROKENDI XR ORAL CAPSULE, EXTENDED RELEASE 24HR 100 MG	4	PA; QL (120 per 30 days)
TROKENDI XR ORAL CAPSULE, EXTENDED RELEASE 24HR 200 MG	4	PA; QL (60 per 30 days)
TROKENDI XR ORAL CAPSULE, EXTENDED RELEASE 24HR 25 MG	4	PA; QL (480 per 30 days)
TROKENDI XR ORAL CAPSULE, EXTENDED RELEASE 24HR 50 MG	4	PA; QL (240 per 30 days)
<i>valproic acid (as sodium salt) oral solution 250 mg/5 ml, 500 mg/10 ml (10 ml)</i>	1	
<i>valproic acid oral capsule 250 mg</i>	1	
VALTOCO NASAL SPRAY, NON-AEROSOL 10 MG/SPRAY (0.1 ML), 15 MG/2 SPRAY (7.5/0.1ML X 2), 20 MG/2 SPRAY (10MG/0.1ML X2), 5 MG/SPRAY (0.1 ML)	2	
<i>vigabatrin oral powder in packet 500 mg</i>	3	PA; SP; LA
<i>vigabatrin oral tablet 500 mg</i>	3	PA; SP; LA
<i>vigadrone oral powder in packet 500 mg</i>	3	PA; SP
<i>vigadrone oral tablet 500 mg</i>	3	PA; SP
VIGAFYDE ORAL SOLUTION 100 MG/ML	4	PA; SP
VIMPAT ORAL SOLUTION 10 MG/ML	4	PA; QL (6 per 30 days)
VIMPAT ORAL TABLET 100 MG	4	PA; QL (120 per 30 days)
VIMPAT ORAL TABLET 150 MG	4	PA; QL (80 per 30 days)
VIMPAT ORAL TABLET 200 MG	4	PA; QL (60 per 30 days)
VIMPAT ORAL TABLET 50 MG	4	PA; QL (240 per 30 days)
XCOPRI MAINTENANCE PACK ORAL TABLET 250MG/DAY (150 MG X1-100MG X1), 350 MG/DAY (200 MG X1-150MG X1)	4	PA
XCOPRI ORAL TABLET 100 MG, 150 MG, 200 MG, 25 MG, 50 MG	4	PA

Drug Name	Tier	Requirements / Limits
XCOPRI TITRATION PACK ORAL TABLETS, DOSE PACK 12.5 MG (14) - 25 MG (14), 150 MG (14) - 200 MG (14), 50 MG (14) - 100 MG (14)	4	PA
ZARONTIN ORAL CAPSULE 250 MG	4	PA; QL (180 per 30 days)
ZARONTIN ORAL SOLUTION 250 MG/5 ML	4	PA; QL (180 per 30 days)
ZONEGRAN ORAL CAPSULE 100 MG, 25 MG	EX	
ZONISADE ORAL SUSPENSION 100 MG/5 ML	4	PA; QL (6 per 30 days)
<i>zonisamide oral capsule 100 mg, 25 mg, 50 mg</i>	1	
ZTALMY ORAL SUSPENSION 50 MG/ML	4	PA; SP
ANTIPARKINSONISM AGENTS		
APOKYN SUBCUTANEOUS CARTRIDGE 10 MG/ML	4	PA; SP; LA
<i>apomorphine subcutaneous cartridge 10 mg/ml</i>	4	PA; SP
AZILECT ORAL TABLET 0.5 MG, 1 MG	4	
<i>benztropine oral tablet 0.5 mg, 1 mg, 2 mg</i>	1	
<i>bromocriptine oral capsule 5 mg</i>	1	
<i>bromocriptine oral tablet 2.5 mg</i>	1	
<i>carbidopa oral tablet 25 mg</i>	1	
<i>carbidopa-levodopa oral tablet 10-100 mg, 25-100 mg, 25-250 mg</i>	1	
<i>carbidopa-levodopa oral tablet extended release 25-100 mg, 50-200 mg</i>	1	
<i>carbidopa-levodopa oral tablet, disintegrating 10-100 mg, 25-100 mg, 25-250 mg</i>	1	
<i>carbidopa-levodopa-entacapone oral tablet 12.5-50-200 mg, 18.75-75-200 mg, 25-100-200 mg, 31.25-125-200 mg, 37.5-150-200 mg, 50-200-200 mg</i>	1	
CREXONT ORAL CAPSULE,IR -EXTEND REL,BIPHASE 35-140 MG, 52.5-210 MG, 70-280 MG, 87.5-350 MG	4	PA
DHIVY ORAL TABLET 25-100 MG	4	PA
<i>entacapone oral tablet 200 mg</i>	1	
GOCOVRI ORAL CAPSULE, EXTENDED RELEASE 24HR 137 MG, 68.5 MG	EX	
INBRIJA INHALATION CAPSULE, W/INHALATION DEVICE 42 MG	4	PA; SP
LODOSYN ORAL TABLET 25 MG	4	PA

Drug Name	Tier	Requirements / Limits
NEUPRO TRANSDERMAL PATCH 24 HOUR 1 MG/24 HOUR, 2 MG/24 HOUR, 3 MG/24 HOUR, 4 MG/24 HOUR, 6 MG/24 HOUR, 8 MG/24 HOUR	EX	
NOURIANZ ORAL TABLET 20 MG, 40 MG	4	PA; SP; LA
ONGENTYS ORAL CAPSULE 25 MG, 50 MG	4	PA
<i>pramipexole oral tablet 0.125 mg, 0.25 mg, 0.5 mg, 0.75 mg, 1 mg, 1.5 mg</i>	1	
<i>pramipexole oral tablet extended release 24 hr 0.375 mg, 0.75 mg, 1.5 mg, 2.25 mg, 3 mg, 3.75 mg, 4.5 mg</i>	1	
<i>rasagiline oral tablet 0.5 mg, 1 mg</i>	1	
<i>ropinirole oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg, 5 mg</i>	1	
<i>ropinirole oral tablet extended release 24 hr 12 mg, 2 mg, 4 mg, 6 mg, 8 mg</i>	1	
RYTARY ORAL CAPSULE, EXTENDED RELEASE 23.75-95 MG, 36.25-145 MG, 48.75-195 MG, 61.25-245 MG	EX	
<i>selegiline hcl oral capsule 5 mg</i>	1	
<i>selegiline hcl oral tablet 5 mg</i>	1	
SINEMET ORAL TABLET 10-100 MG, 25-100 MG	4	PA
TASMAR ORAL TABLET 100 MG	4	
<i>tolcapone oral tablet 100 mg</i>	1	
<i>trihexyphenidyl oral elixir 0.4 mg/ml</i>	1	
<i>trihexyphenidyl oral tablet 2 mg, 5 mg</i>	1	
XADAGO ORAL TABLET 100 MG, 50 MG	EX	
ZELAPAR ORAL TABLET, DISINTEGRATING 1.25 MG	EX	
MIGRAINE & CLUSTER HEADACHE THERAPY		
AIMOVIG AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR 140 MG/ML, 70 MG/ML	2	PA
AJOVY AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR 225 MG/1.5 ML	2	PA
AJOVY SUBCUTANEOUS SYRINGE 225 MG/1.5 ML	2	PA
<i>almotriptan malate oral tablet 12.5 mg, 6.25 mg</i>	1	QL (18 per 30 days)
<i>dihydroergotamine injection solution 1 mg/ml</i>	1	

Drug Name	Tier	Requirements / Limits
<i>dihydroergotamine nasal spray, non-aerosol 0.5 mg/pump act. (4 mg/ml)</i>	4	QL (8 per 30 days)
<i>eletriptan oral tablet 20 mg, 40 mg</i>	1	QL (18 per 30 days)
ELYXYB ORAL SOLUTION 120 MG/4.8 ML (25 MG/ML)	4	PA
EMGALITY SUBCUTANEOUS PEN INJECTOR 120 MG/ML	2	PA
EMGALITY SUBCUTANEOUS SYRINGE 120 MG/ML, 300 MG/3 ML (100 MG/ML X 3)	2	PA
ERGOMAR SUBLINGUAL TABLET 2 MG	EX	
<i>ergotamine-caffeine oral tablet 1-100 mg</i>	1	
FROVA ORAL TABLET 2.5 MG	EX	
<i>frovatriptan oral tablet 2.5 mg</i>	1	QL (18 per 30 days)
IMITREX ORAL TABLET 100 MG, 25 MG, 50 MG	EX	
IMITREX STATDOSE SUBCUTANEOUS PEN INJECTOR 4 MG/0.5 ML, 6 MG/0.5 ML	EX	
IMITREX STATDOSE REFILL SUBCUTANEOUS CARTRIDGE 4 MG/0.5 ML, 6 MG/0.5 ML	EX	
MAXALT ORAL TABLET 10 MG	EX	
MAXALT-MLT ORAL TABLET, DISINTEGRATING 10 MG	EX	
<i>migergot rectal suppository 2-100 mg</i>	1	
MIGRANAL NASAL SPRAY, NON-AEROSOL 0.5 MG/PUMP ACT. (4 MG/ML)	EX	
<i>naratriptan oral tablet 1 mg, 2.5 mg</i>	1	QL (18 per 30 days)
NURTEC ODT ORAL TABLET, DISINTEGRATING 75 MG	4	PA; QL (8 per 30 days)
ONZETRA XSAIL NASAL AEROSOL POWDR BREATH ACTIVATED 11 MG	EX	
QULIPTA ORAL TABLET 10 MG, 30 MG, 60 MG	4	PA
RELPAZ ORAL TABLET 20 MG, 40 MG	EX	
REYVOW ORAL TABLET 100 MG, 50 MG	4	PA; QL (8 per 30 days)
<i>rizatriptan oral tablet 10 mg, 5 mg</i>	1	QL (18 per 30 days)
<i>rizatriptan oral tablet, disintegrating 10 mg, 5 mg</i>	1	QL (18 per 30 days)
<i>sumatriptan nasal spray, non-aerosol 20 mg/actuation, 5 mg/actuation</i>	1	QL (18 per 30 days)

Drug Name	Tier	Requirements / Limits
<i>sumatriptan succinate oral tablet 100 mg, 25 mg, 50 mg</i>	1	QL (18 per 30 days)
<i>sumatriptan succinate subcutaneous cartridge 4 mg/0.5 ml, 6 mg/0.5 ml</i>	1	QL (8 per 30 days)
<i>sumatriptan succinate subcutaneous pen injector 4 mg/0.5 ml, 6 mg/0.5 ml</i>	1	QL (8 per 30 days)
<i>sumatriptan succinate subcutaneous solution 6 mg/0.5 ml</i>	1	QL (8 per 30 days)
<i>sumatriptan-naproxen oral tablet 85-500 mg</i>	EX	
SYMBRAVO ORAL TABLET 10-20 MG	EX	
TOSYMRA NASAL SPRAY, NON-AEROSOL 10 MG/ACTUATION	4	QL (18 per 30 days)
TREXIMET ORAL TABLET 85-500 MG	EX	
TRUDHESA NASAL SPRAY, NON-AEROSOL 0.725 MG/PUMP ACT. (4 MG/ML)	4	PA; QL (18 per 30 days)
UBRELVY ORAL TABLET 100 MG, 50 MG	4	PA; QL (10 per 30 days)
ZAVZPRET NASAL SPRAY, NON-AEROSOL 10 MG/ACTUATION	4	PA; QL (8 per 30 days)
ZOLMITRIPTAN NASAL SPRAY, NON-AEROSOL 2.5 MG	EX	
<i>zolmitriptan nasal spray, non-aerosol 5 mg</i>	4	PA
<i>zolmitriptan oral tablet 2.5 mg, 5 mg</i>	1	QL (18 per 30 days)
<i>zolmitriptan oral tablet, disintegrating 2.5 mg, 5 mg</i>	1	QL (18 per 30 days)
ZOMIG NASAL SPRAY, NON-AEROSOL 2.5 MG, 5 MG	EX	
ZOMIG ORAL TABLET 2.5 MG, 5 MG	EX	
MISCELLANEOUS NEUROLOGICAL THERAPY		
ADLARITY TRANSDERMAL PATCH WEEKLY 10 MG/24 HOUR, 5 MG/24 HOUR	4	
AMPYRA ORAL TABLET EXTENDED RELEASE 12 HR 10 MG	EX	
ARICEPT ORAL TABLET 10 MG, 23 MG, 5 MG	4	
AUSTEDO ORAL TABLET 12 MG, 6 MG, 9 MG	3	PA; SP; LA
AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HR 12 MG, 18 MG, 24 MG, 30 MG, 36 MG, 42 MG, 48 MG, 6 MG	3	PA; SP; LA

Drug Name	Tier	Requirements / Limits
AUSTEDO XR TITRATION KT(WK1-4) ORAL TABLET, EXT REL 24HR DOSE PACK 12-18-24-30 MG	3	PA; SP; LA
<i>dalfampridine oral tablet extended release 12 hr 10 mg</i>	4	PA; SP; LA; QL (60 per 30 days)
DAYBUE ORAL SOLUTION 200 MG/ML	4	PA; SP
<i>dichlorphenamide oral tablet 50 mg</i>	4	PA; SP; LA; QL (120 per 30 days)
<i>donepezil oral tablet 10 mg, 23 mg, 5 mg</i>	1	
<i>donepezil oral tablet, disintegrating 10 mg, 5 mg</i>	1	
EVRYSDI ORAL RECON SOLN 0.75 MG/ML	4	PA; SP; LA; QL (240 per 30 days)
EVRYSDI ORAL TABLET 5 MG	4	PA; SP; LA
EXELON PATCH TRANSDERMAL PATCH 24 HOUR 13.3 MG/24 HOUR, 4.6 MG/24 HOUR, 9.5 MG/24 HOUR	EX	
FIRDAPSE ORAL TABLET 10 MG	4	PA; SP
<i>galantamine oral capsule, ext rel. pellets 24 hr 16 mg, 24 mg, 8 mg</i>	1	
<i>galantamine oral solution 4 mg/ml</i>	1	
<i>galantamine oral tablet 12 mg, 4 mg, 8 mg</i>	1	
HORIZANT ORAL TABLET EXTENDED RELEASE 300 MG, 600 MG	EX	
INGREZZA INITIATION PK(TARDIV) ORAL CAPSULE, DOSE PACK 40 MG (7)- 80 MG (21)	EX	
INGREZZA ORAL CAPSULE 40 MG, 60 MG, 80 MG	EX	
INGREZZA SPRINKLE ORAL CAPSULE, SPRINKLE 40 MG, 60 MG, 80 MG	EX	
KEVEYIS ORAL TABLET 50 MG	EX	
<i>memantine oral capsule, sprinkle, er 24hr 14 mg, 21 mg, 28 mg, 7 mg</i>	4	
<i>memantine oral solution 2 mg/ml</i>	1	
<i>memantine oral tablet 10 mg, 5 mg</i>	1	
MEMANTINE ORAL TABLETS, DOSE PACK 5-10 MG	2	
<i>memantine-donepezil oral capsule, sprinkle, er 24hr 14-10 mg, 21-10 mg, 28-10 mg</i>	4	
MIPLYFFA ORAL CAPSULE 124 MG, 47 MG, 62 MG, 93 MG	4	PA; SP

Drug Name	Tier	Requirements / Limits
NAMENDA TITRATION PAK ORAL TABLETS, DOSE PACK 5-10 MG	4	
NAMENDA XR ORAL CAP, SPRINKLE, ER 24HR DOSE PACK 7-14-21-28 MG	EX	
NAMENDA XR ORAL CAPSULE, SPRINKLE, ER 24HR 7 MG	EX	
NAMZARIC ORAL CAPSULE, SPRINKLE, ER 24HR 14-10 MG, 21-10 MG, 28-10 MG	EX	
NAMZARIC ORAL CAPSULE, SPRINKLE, ER 24HR 7-10 MG	4	
NUEDEXTA ORAL CAPSULE 20-10 MG	4	PA; QL (60 per 30 days)
<i>ormalvi oral tablet 50 mg</i>	4	PA; SP; QL (121 per 30 days)
<i>rivastigmine tartrate oral capsule 1.5 mg, 3 mg, 4.5 mg, 6 mg</i>	1	
<i>rivastigmine transdermal patch 24 hour 13.3 mg/24 hour, 4.6 mg/24 hour, 9.5 mg/24 hour</i>	1	
SKYCLARYS ORAL CAPSULE 50 MG	4	PA; SP
<i>tetrabenazine oral tablet 12.5 mg, 25 mg</i>	3	SP; LA
WAINUA SUBCUTANEOUS AUTO-INJECTOR 45 MG/0.8 ML	4	PA; SP; QL (30 per 30 days)
XENAZINE ORAL TABLET 12.5 MG, 25 MG	EX	
ZEPOSIA ORAL CAPSULE 0.92 MG	4	PA; SP; LA; QL (30 per 30 days)
ZEPOSIA STARTER KIT (28-DAY) ORAL CAPSULE, DOSE PACK 0.23 MG-0.46 MG - 0.92 MG (21)	4	PA; SP; LA; QL (1 per 365 days)
ZEPOSIA STARTER PACK (7-DAY) ORAL CAPSULE, DOSE PACK 0.23 MG (4)- 0.46 MG (3)	4	PA; SP; LA; QL (1 per 365 days)
ZUNVEYL ORAL TABLET, DELAYED RELEASE (DR/EC) 10 MG, 15 MG, 5 MG	EX	
MUSCLE RELAXANTS & ANTISPASMODIC THERAPY		
AMRIX ORAL CAPSULE, EXTENDED RELEASE 24HR 15 MG, 30 MG	EX	
BACLOFEN ORAL SOLUTION 10 MG/5 ML (2 MG/ML)	EX	
<i>baclofen oral solution 5 mg/5 ml</i>	EX	
<i>baclofen oral suspension 25 mg/5 ml (5 mg/ml)</i>	4	
<i>baclofen oral tablet 10 mg, 20 mg</i>	1	
<i>baclofen oral tablet 15 mg</i>	EX	

Drug Name	Tier	Requirements / Limits
<i>baclofen oral tablet 5 mg</i>	4	
<i>carisoprodol oral tablet 250 mg, 350 mg</i>	1	
<i>carisoprodol-aspirin oral tablet 200-325 mg</i>	1	
<i>carisoprodol-aspirin-codeine oral tablet 200-325-16 mg</i>	1	PA
<i>chlorzoxazone oral tablet 250 mg, 375 mg, 750 mg</i>	1	PA
<i>chlorzoxazone oral tablet 500 mg</i>	1	
<i>cyclobenzaprine oral capsule, extended release 24hr 15 mg, 30 mg</i>	EX	
<i>cyclobenzaprine oral tablet 10 mg, 5 mg, 7.5 mg</i>	1	
DANTRIUM ORAL CAPSULE 25 MG	4	
<i>dantrolene oral capsule 100 mg, 25 mg, 50 mg</i>	1	
FEXMID ORAL TABLET 7.5 MG	EX	
FLEQSUVY ORAL SUSPENSION 25 MG/5 ML (5 MG/ML)	EX	
LORZONE ORAL TABLET 375 MG, 750 MG	EX	
<i>meprobamate oral tablet 200 mg, 400 mg</i>	4	
MESTINON ORAL SYRUP 60 MG/5 ML	EX	
MESTINON ORAL TABLET 60 MG	EX	
MESTINON TIMESPAN ORAL TABLET EXTENDED RELEASE 180 MG	EX	
<i>metaxalone oral tablet 400 mg, 800 mg</i>	4	
METAXALONE ORAL TABLET 640 MG	EX	
<i>methocarbamol oral tablet 1, 000 mg</i>	4	
<i>methocarbamol oral tablet 500 mg, 750 mg</i>	1	
NORGESIC FORTE ORAL TABLET 50-770-60 MG	EX	
NORGESIC ORAL TABLET 25-385-30 MG	EX	
<i>orphenadrine citrate oral tablet extended release 100 mg</i>	1	
<i>orphenadrine-asa-caffeine oral tablet 25-385-30 mg</i>	4	
<i>orphengesic forte oral tablet 50-770-60 mg</i>	EX	
OZOBAX DS ORAL SOLUTION 10 MG/5 ML (2 MG/ML)	EX	
OZOBAX ORAL SOLUTION 5 MG/5 ML	4	PA
<i>pyridostigmine bromide oral syrup 60 mg/5 ml</i>	1	

Drug Name	Tier	Requirements / Limits
PYRIDOSTIGMINE BROMIDE ORAL TABLET 30 MG	4	
<i>pyridostigmine bromide oral tablet 60 mg</i>	1	
<i>pyridostigmine bromide oral tablet extended release 180 mg</i>	1	
SOMA ORAL TABLET 250 MG, 350 MG	4	
<i>tanlor oral tablet 1,000 mg</i>	4	
<i>tizanidine oral capsule 2 mg, 4 mg, 6 mg</i>	EX	
<i>tizanidine oral tablet 2 mg, 4 mg</i>	1	
<i>vanadom oral tablet 350 mg</i>	1	
ZANAFLEX ORAL CAPSULE 2 MG, 4 MG, 6 MG	EX	
ZANAFLEX ORAL TABLET 4 MG	4	
ZILBRYSQ SUBCUTANEOUS SYRINGE 16.6 MG/0.416 ML, 23 MG/0.574 ML, 32.4 MG/0.81 ML	3	PA; SP
NARCOTIC ANALGESICS		
<i>acetaminophen-caff-dihydrocod oral capsule 320.5-30-16 mg</i>	1	PA
<i>acetaminophen-codeine oral solution 120-12 mg/5 ml, 300 mg-30 mg /12.5 ml</i>	1	PA
<i>acetaminophen-codeine oral tablet 300-15 mg, 300-30 mg, 300-60 mg</i>	1	PA
<i>ascomp with codeine oral capsule 30-50-325-40 mg</i>	1	PA
BELBUCA BUCCAL FILM 150 MCG, 300 MCG, 450 MCG, 600 MCG, 75 MCG, 750 MCG, 900 MCG	4	PA
<i>buprenorphine hcl sublingual tablet 2 mg, 8 mg</i>	1	
<i>buprenorphine transdermal patch weekly 10 mcg/hour, 15 mcg/hour, 20 mcg/hour, 5 mcg/hour, 7.5 mcg/hour</i>	4	
<i>butalbital-acetaminop-caf-cod oral capsule 50-300-40-30 mg, 50-325-40-30 mg</i>	4	PA
<i>butalbital-acetaminophen oral capsule 50-300 mg</i>	EX	
<i>butalbital-acetaminophen oral tablet 50-300 mg, 50-325 mg</i>	EX	
<i>butalbital-acetaminophen-caff oral capsule 50-300-40 mg, 50-325-40 mg</i>	1	

Drug Name	Tier	Requirements / Limits
<i>butalbital-acetaminophen-caff oral tablet 50-325-40 mg</i>	1	
<i>butalbital-aspirin-caffeine oral capsule 50-325-40 mg</i>	1	
<i>butalbital-aspirin-caffeine oral tablet 50-325-40 mg</i>	1	
BUTRANS TRANSDERMAL PATCH WEEKLY 10 MCG/HOUR, 15 MCG/HOUR, 20 MCG/HOUR, 5 MCG/HOUR, 7.5 MCG/HOUR	EX	
<i>codeine sulfate oral tablet 15 mg, 30 mg, 60 mg</i>	1	PA
<i>codeine-butalbital-asa-caff oral capsule 30-50-325-40 mg</i>	1	PA
DILAUDID ORAL LIQUID 1 MG/ML	4	PA
DILAUDID ORAL TABLET 2 MG, 4 MG, 8 MG	4	PA
<i>diskets oral tablet, soluble 40 mg</i>	1	PA
DSUVIA SUBLINGUAL TABLET IN APPLICATOR 30 MCG	4	
<i>endocet oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg</i>	1	PA
<i>fentanyl transdermal patch 72 hour 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 37.5 mcg/hour, 50 mcg/hr, 62.5 mcg/hour, 75 mcg/hr, 87.5 mcg/hour</i>	1	PA
FIORICET ORAL CAPSULE 50-300-40 MG	EX	
FIORICET WITH CODEINE ORAL CAPSULE 50-300-40-30 MG	EX	
<i>hydrocodone bitartrate oral capsule, oral only, er 12hr 10 mg, 15 mg, 20 mg, 30 mg, 40 mg, 50 mg</i>	4	PA; QL (60 per 30 days)
<i>hydrocodone bitartrate oral tablet, oral only, ext.rel.24 hr 100 mg, 120 mg, 20 mg, 30 mg, 40 mg, 60 mg, 80 mg</i>	4	PA
<i>hydrocodone-acetaminophen oral solution 10-325 mg/15 ml, 10-325 mg/15 ml(15 ml), 7.5-325 mg/15 ml</i>	1	PA
<i>hydrocodone-acetaminophen oral tablet 10-300 mg, 10-325 mg, 2.5-325 mg, 5-300 mg, 5-325 mg, 7.5-300 mg, 7.5-325 mg</i>	1	PA
<i>hydrocodone-ibuprofen oral tablet 10-200 mg, 5-200 mg, 7.5-200 mg</i>	1	PA
<i>hydromorphone oral liquid 1 mg/ml</i>	1	PA
<i>hydromorphone oral tablet 2 mg, 4 mg, 8 mg</i>	1	PA

Drug Name	Tier	Requirements / Limits
<i>hydromorphone oral tablet extended release 24 hr 12 mg, 16 mg, 32 mg, 8 mg</i>	1	PA; QL (60 per 30 days)
<i>hydromorphone rectal suppository 3 mg</i>	1	PA
HYSINGLA ER ORAL TABLET, ORAL ONLY, EXT.REL.24 HR 100 MG, 20 MG, 30 MG, 40 MG, 60 MG, 80 MG	4	PA
<i>levorphanol tartrate oral tablet 2 mg, 3 mg</i>	EX	
<i>meperidine oral solution 50 mg/5 ml</i>	1	PA
<i>meperidine oral tablet 50 mg</i>	1	PA
<i>methadone oral concentrate 10 mg/ml</i>	1	PA
<i>methadone oral solution 10 mg/5 ml, 5 mg/5 ml</i>	1	PA
<i>methadone oral tablet 10 mg, 5 mg</i>	1	PA
<i>methadone oral tablet, soluble 40 mg</i>	1	PA
<i>methadose oral concentrate 10 mg/ml</i>	1	PA
<i>methadose oral tablet, soluble 40 mg</i>	1	PA
<i>morphine concentrate oral solution 100 mg/5 ml (20 mg/ml)</i>	1	PA
<i>morphine oral capsule, er multiphase 24 hr 120 mg, 30 mg, 45 mg, 60 mg, 75 mg, 90 mg</i>	1	PA; QL (60 per 30 days)
<i>morphine oral capsule, extend.release pellets 10 mg, 100 mg, 20 mg, 30 mg, 50 mg, 60 mg, 80 mg</i>	1	PA; QL (90 per 30 days)
<i>morphine oral solution 10 mg/5 ml, 20 mg/5 ml (4 mg/ml)</i>	1	PA
<i>morphine oral tablet 15 mg, 30 mg</i>	1	PA
<i>morphine oral tablet extended release 100 mg, 15 mg, 200 mg, 30 mg, 60 mg</i>	1	PA; QL (120 per 30 days)
<i>morphine rectal suppository 10 mg, 20 mg, 30 mg, 5 mg</i>	1	PA
MS CONTIN ORAL TABLET EXTENDED RELEASE 15 MG, 30 MG, 60 MG	4	PA; QL (120 per 30 days)
NALOCET ORAL TABLET 2.5-300 MG	4	PA
<i>oxycodone oral capsule 5 mg</i>	1	PA
<i>oxycodone oral concentrate 20 mg/ml</i>	1	PA
<i>oxycodone oral solution 5 mg/5 ml</i>	1	PA
<i>oxycodone oral tablet 10 mg, 15 mg, 20 mg, 30 mg, 5 mg</i>	1	PA
OXYCODONE ORAL TABLET, ORAL ONLY 10 MG, 15 MG, 30 MG, 5 MG	EX	

Drug Name	Tier	Requirements / Limits
OXYCODONE ORAL TABLET, ORAL ONLY, EXT.REL.12 HR 10 MG, 20 MG, 40 MG, 80 MG	EX	
<i>oxycodone-acetaminophen oral solution 10-300 mg/5 ml, 5-325 mg/5 ml</i>	4	PA
<i>oxycodone-acetaminophen oral tablet 10-300 mg, 2.5-300 mg, 5-300 mg, 7.5-300 mg</i>	4	PA
<i>oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg</i>	1	PA
OXYCONTIN ORAL TABLET, ORAL ONLY, EXT.REL.12 HR 10 MG, 15 MG, 20 MG, 30 MG, 40 MG	2	PA; QL (90 per 30 days)
OXYCONTIN ORAL TABLET, ORAL ONLY, EXT.REL.12 HR 60 MG, 80 MG	2	PA; QL (120 per 30 days)
<i>oxymorphone oral tablet 10 mg, 5 mg</i>	1	PA
<i>oxymorphone oral tablet extended release 12 hr 10 mg, 15 mg, 20 mg, 30 mg, 40 mg, 5 mg, 7.5 mg</i>	1	PA; QL (90 per 30 days)
PERCOCET ORAL TABLET 10-325 MG, 2.5-325 MG, 5-325 MG, 7.5-325 MG	EX	
PRIMLEV ORAL TABLET 10-300 MG, 5-300 MG, 7.5-300 MG	4	PA
PROLATE ORAL SOLUTION 10-300 MG/5 ML	4	PA
<i>prolate oral tablet 10-300 mg, 5-300 mg, 7.5-300 mg</i>	4	PA
ROXICODONE ORAL TABLET 15 MG, 30 MG	EX	
ROXYBOND ORAL TABLET, ORAL ONLY 10 MG, 15 MG, 30 MG, 5 MG	EX	
SUBLOCADE SUBCUTANEOUS SOLUTION, EXTENDED REL SYRINGE 100 MG/0.5 ML, 300 MG/1.5 ML	4	SP
<i>tencon oral tablet 50-325 mg</i>	1	
TREZIX ORAL CAPSULE 320.5-30-16 MG	4	PA
XTAMPZA ER ORAL CAP, SPRINKL, ER12HR (DONT CRUSH) 13.5 MG, 18 MG, 27 MG, 36 MG, 9 MG	EX	
NON-NARCOTIC ANALGESICS		
<i>adult aspirin regimen oral tablet, delayed release (dr/ec) 81 mg</i>	4	ACA PV
ANAPROX DS ORAL TABLET 550 MG	4	ST
ARTHROTEC 50 ORAL TABLET, IR, DELAYED REL, BIPHASIC 50-200 MG-MCG	4	

Drug Name	Tier	Requirements / Limits
ARTHROTEC 75 ORAL TABLET, IR, DELAYED REL, BIPHASIC 75-200 MG-MCG	4	
<i>aspirin childrens oral tablet, chewable 81 mg</i>	1	ACA PV
<i>aspirin oral tablet 81 mg</i>	1	ACA PV
<i>aspirin oral tablet, chewable 81 mg</i>	1	ACA PV
<i>aspirin oral tablet, delayed release (dr/ec) 81 mg</i>	4	ACA PV
<i>bayer low dose aspirin oral tablet, delayed release (dr/ec) 81 mg</i>	4	ACA PV
<i>buprenorphine-naloxone sublingual film 12-3 mg</i>	1	QL (60 per 30 days)
<i>buprenorphine-naloxone sublingual film 2-0.5 mg, 4-1 mg, 8-2 mg</i>	1	QL (90 per 30 days)
<i>buprenorphine-naloxone sublingual tablet 2-0.5 mg, 8-2 mg</i>	1	QL (90 per 30 days)
<i>butorphanol nasal spray, non-aerosol 10 mg/ml</i>	1	PA; QL (2 per 30 days)
CELEBREX ORAL CAPSULE 100 MG, 200 MG, 400 MG, 50 MG	EX	
<i>celecoxib oral capsule 100 mg, 200 mg, 400 mg, 50 mg</i>	1	
CONZIP ORAL CAPSULE, ER BIPHASE 24 HR 17-83 300 MG	EX	
CONZIP ORAL CAPSULE, ER BIPHASE 24 HR 25-75 100 MG, 200 MG	EX	
COXANTO ORAL CAPSULE 300 MG	EX	
DAYPRO ORAL TABLET 600 MG	4	ST
DICLOFENAC EPOLAMINE TRANSDERMAL PATCH 12 HOUR 1.3 %	EX	
<i>diclofenac potassium oral capsule 25 mg</i>	EX	
<i>diclofenac potassium oral powder in packet 50 mg</i>	EX	
<i>diclofenac potassium oral tablet 25 mg</i>	EX	
<i>diclofenac potassium oral tablet 50 mg</i>	1	
<i>diclofenac sodium oral tablet extended release 24 hr 100 mg</i>	1	
<i>diclofenac sodium oral tablet, delayed release (dr/ec) 25 mg, 50 mg, 75 mg</i>	1	
<i>diclofenac sodium topical drops 1.5 %</i>	1	
<i>diclofenac sodium topical solution in metered-dose pump 20 mg/gram /actuation(2 %)</i>	EX	
DICLOFENAC SUBMICRONIZED ORAL CAPSULE 35 MG	4	ST

Drug Name	Tier	Requirements / Limits
<i>diclofenac-misoprostol oral tablet, ir, delayed rel, biphasic 50-200 mg-mcg, 75-200 mg-mcg</i>	4	
<i>diflunisal oral tablet 500 mg</i>	1	
DISALCID ORAL TABLET 500 MG, 750 MG	4	
DOLOBID ORAL TABLET 250 MG, 375 MG	EX	
EC-NAPROSYN ORAL TABLET, DELAYED RELEASE (DR/EC) 375 MG, 500 MG	4	ST
<i>ecotrin low strength oral tablet, delayed release (dr/ec) 81 mg</i>	1	ACA PV
<i>etodolac oral capsule 200 mg, 300 mg</i>	1	
<i>etodolac oral tablet 400 mg, 500 mg</i>	1	
<i>etodolac oral tablet extended release 24 hr 400 mg, 500 mg, 600 mg</i>	1	
FENOPROFEN ORAL CAPSULE 200 MG	EX	
<i>fenopropfen oral capsule 400 mg</i>	EX	
<i>fenopropfen oral tablet 600 mg</i>	EX	
FENOPRON ORAL CAPSULE 300 MG	EX	
FLECTOR TRANSDERMAL PATCH 12 HOUR 1.3 %	EX	
<i>flurbiprofen oral tablet 100 mg</i>	1	
<i>ibu oral tablet 400 mg, 600 mg, 800 mg</i>	1	
<i>ibuprofen oral suspension 100 mg/5 ml</i>	1	
<i>ibuprofen oral tablet 400 mg, 600 mg, 800 mg</i>	1	
<i>ibuprofen-famotidine oral tablet 800-26.6 mg</i>	4	PA
INDOCIN ORAL SUSPENSION 25 MG/5 ML	EX	
INDOCIN RECTAL SUPPOSITORY 50 MG	EX	
<i>indomethacin oral capsule 25 mg, 50 mg</i>	1	
<i>indomethacin oral capsule, extended release 75 mg</i>	1	
<i>indomethacin oral suspension 25 mg/5 ml</i>	EX	
<i>indomethacin rectal suppository 50 mg</i>	EX	
JOURNAVX ORAL TABLET 50 MG	4	PA
<i>ketoprofen oral capsule 25 mg, 50 mg, 75 mg</i>	1	
<i>ketoprofen oral capsule, ext rel. pellets 24 hr 200 mg</i>	1	
<i>ketorolac injection solution 15 mg/ml, 30 mg/ml (1 ml)</i>	1	

Drug Name	Tier	Requirements / Limits
<i>ketorolac injection syringe 30 mg/ml</i>	1	
<i>ketorolac intramuscular solution 60 mg/2 ml</i>	1	
<i>ketorolac oral tablet 10 mg</i>	1	QL (20 per 5 days)
<i>kiprofen oral capsule 25 mg</i>	1	
KLOXXADO NASAL SPRAY, NON-AEROSOL 8 MG/ACTUATION	4	
LICART TRANSDERMAL PATCH 24 HOUR 1.3 %	4	ST
LODINE ORAL TABLET 400 MG	4	ST
<i>lofena oral tablet 25 mg</i>	EX	
<i>lofexidine oral tablet 0.18 mg</i>	EX	
LUCEMYRA ORAL TABLET 0.18 MG	EX	
<i>meclofenamate oral capsule 100 mg, 50 mg</i>	4	
<i>mefenamic acid oral capsule 250 mg</i>	4	
MELOXICAM ORAL SUSPENSION 7.5 MG/5 ML	EX	
<i>meloxicam oral tablet 15 mg, 7.5 mg</i>	1	
<i>meloxicam submicronized oral capsule 10 mg, 5 mg</i>	4	
<i>nabumetone oral tablet 500 mg, 750 mg</i>	1	
NALFON ORAL CAPSULE 400 MG	EX	
NALFON ORAL TABLET 600 MG	EX	
<i>naloxone injection syringe 0.4 mg/ml, 1 mg/ml</i>	1	
<i>naltrexone oral tablet 50 mg</i>	1	
NAPRELAN CR ORAL TABLET, ER MULTIPHASE 24 HR 375 MG, 500 MG, 750 MG	EX	
NAPROSYN ORAL SUSPENSION 125 MG/5 ML	4	ST
NAPROSYN ORAL TABLET 500 MG	4	ST
<i>naproxen oral suspension 125 mg/5 ml</i>	1	
<i>naproxen oral tablet 250 mg, 375 mg, 500 mg</i>	1	
<i>naproxen oral tablet, delayed release (dr/ec) 375 mg, 500 mg</i>	1	
<i>naproxen sodium oral tablet 275 mg, 550 mg</i>	1	
<i>naproxen sodium oral tablet, er multiphase 24 hr 375 mg, 500 mg, 750 mg</i>	EX	

Drug Name	Tier	Requirements / Limits
<i>naproxen-esomeprazole oral tablet, ir, delayed rel, biphasic 375-20 mg, 500-20 mg</i>	EX	
NARCAN NASAL SPRAY, NON-AEROSOL 4 MG/ACTUATION	4	
NUCYNTA ER ORAL TABLET EXTENDED RELEASE 12 HR 100 MG, 150 MG, 200 MG, 250 MG, 50 MG	EX	
NUCYNTA ORAL TABLET 100 MG, 50 MG, 75 MG	EX	
OPVEE NASAL SPRAY, NON-AEROSOL 2.7 MG/ACTUATION	4	PA
OXAPROZIN ORAL CAPSULE 300 MG	EX	
<i>oxaprozin oral tablet 600 mg</i>	1	
PENNSAID TOPICAL SOLUTION IN METERED-DOSE PUMP 20 MG/GRAM /ACTUATION (2 %)	EX	
<i>pentazocine-naloxone oral tablet 50-0.5 mg</i>	1	PA
<i>piroxicam oral capsule 10 mg, 20 mg</i>	1	
RELAFEN DS ORAL TABLET 1, 000 MG	4	ST
REXTOVY NASAL SPRAY, NON-AEROSOL 4 MG/ACTUATION	4	
<i>salsalate oral tablet 500 mg, 750 mg</i>	1	
SPRIX NASAL SPRAY, NON-AEROSOL 15.75 MG/SPRAY	EX	
<i>st joseph aspirin oral tablet, chewable 81 mg</i>	4	ACA PV
<i>st. joseph aspirin oral tablet, delayed release (dr/ec) 81 mg</i>	4	ACA PV
SUBOXONE SUBLINGUAL FILM 12-3 MG	4	QL (60 per 30 days)
SUBOXONE SUBLINGUAL FILM 2-0.5 MG, 4-1 MG, 8-2 MG	4	QL (90 per 30 days)
<i>sulindac oral tablet 150 mg, 200 mg</i>	1	
TOLECTIN 600 ORAL TABLET 600 MG	4	ST
<i>tolmetin oral capsule 400 mg</i>	1	
<i>tolmetin oral tablet 600 mg</i>	1	
TRAMADOL ORAL CAPSULE, ER BIPHASE 24 HR 17-83 300 MG	EX	
TRAMADOL ORAL CAPSULE, ER BIPHASE 24 HR 25-75 100 MG, 200 MG	EX	
TRAMADOL ORAL SOLUTION 5 MG/ML	4	PA

Drug Name	Tier	Requirements / Limits
<i>tramadol oral tablet 100 mg</i>	EX	
TRAMADOL ORAL TABLET 25 MG, 75 MG	EX	
<i>tramadol oral tablet 50 mg</i>	1	PA
<i>tramadol oral tablet extended release 24 hr 100 mg, 200 mg, 300 mg</i>	1	PA
<i>tramadol oral tablet, er multiphase 24 hr 100 mg, 200 mg, 300 mg</i>	1	PA
<i>tramadol-acetaminophen oral tablet 37.5-325 mg</i>	1	PA
VIMOVO ORAL TABLET, IR, DELAYED REL, BIPHASIC 500-20 MG	EX	
VIVITROL INTRAMUSCULAR SUSPENSION, EXTENDED REL RECON 380 MG	4	SP
VIVLODEX ORAL CAPSULE 10 MG, 5 MG	EX	
ZIMHI INJECTION SYRINGE 5 MG/0.5 ML	4	
ZIPSOR ORAL CAPSULE 25 MG	EX	
ZORVOLEX ORAL CAPSULE 18 MG, 35 MG	EX	
ZUBSOLV SUBLINGUAL TABLET 0.7-0.18 MG, 1.4-0.36 MG, 2.9-0.71 MG, 5.7-1.4 MG	4	QL (90 per 30 days)
ZUBSOLV SUBLINGUAL TABLET 11.4-2.9 MG	4	QL (30 per 30 days)
ZUBSOLV SUBLINGUAL TABLET 8.6-2.1 MG	4	QL (60 per 30 days)
PSYCHOTHERAPEUTIC DRUGS		
ABILIFY ASIMTUFII INTRAMUSCULAR SUSPENSION, EXTENDED REL SYRING 720 MG/2.4 ML, 960 MG/3.2 ML	4	
ABILIFY MAINTENA INTRAMUSCULAR SUSPENSION, EXTENDED REL RECON 300 MG, 400 MG	4	
ABILIFY MAINTENA INTRAMUSCULAR SUSPENSION, EXTENDED REL SYRING 300 MG, 400 MG	4	
ABILIFY ORAL TABLET 10 MG, 15 MG, 2 MG, 20 MG, 30 MG, 5 MG	EX	
ADASUVE INHALATION AEROSOL POWDR BREATH ACTIVATED 10 MG	4	
ADDERALL ORAL TABLET 10 MG, 12.5 MG, 15 MG, 20 MG, 30 MG, 5 MG, 7.5 MG	EX	
ADDERALL XR ORAL CAPSULE, EXTENDED RELEASE 24HR 10 MG, 15 MG, 20 MG, 25 MG, 30 MG, 5 MG	4	PA

Drug Name	Tier	Requirements / Limits
ADDYI ORAL TABLET 100 MG	2	PA
ADZENYS XR-ODT ORAL TABLET, DISINTEG ER BIPHASE 24H 12.5 MG, 15.7 MG, 18.8 MG, 3.1 MG, 6.3 MG, 9.4 MG	4	PA
<i>alprazolam intensol oral concentrate 1 mg/ml</i>	4	
<i>alprazolam oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg</i>	1	
<i>alprazolam oral tablet extended release 24 hr 0.5 mg, 1 mg, 2 mg, 3 mg</i>	1	
<i>alprazolam oral tablet, disintegrating 0.25 mg, 0.5 mg, 1 mg, 2 mg</i>	1	
AMBIEN CR ORAL TABLET, EXT RELEASE MULTIPHASE 12.5 MG, 6.25 MG	EX	
AMBIEN ORAL TABLET 10 MG, 5 MG	EX	
<i>amitriptyline oral tablet 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg</i>	1	
<i>amitriptyline-chlordiazepoxide oral tablet 12.5-5 mg, 25-10 mg</i>	1	
<i>amoxapine oral tablet 100 mg, 150 mg, 25 mg, 50 mg</i>	1	
<i>amphetamine sulfate oral tablet 10 mg, 5 mg</i>	4	
ANAFRANIL ORAL CAPSULE 25 MG, 50 MG, 75 MG	4	
ALENZIN ORAL TABLET EXTENDED RELEASE 24 HR 174 MG, 348 MG, 522 MG	EX	
APTENSIO XR ORAL CAP, ER SPRINKLE, BIPHASIC 40-60 10 MG, 15 MG, 20 MG, 30 MG, 40 MG, 50 MG, 60 MG	4	PA
<i>aripiprazole oral solution 1 mg/ml</i>	1	
<i>aripiprazole oral tablet 10 mg, 15 mg, 2 mg, 20 mg, 30 mg, 5 mg</i>	1	
<i>aripiprazole oral tablet, disintegrating 10 mg, 15 mg</i>	1	
ARISTADA INITIO INTRAMUSCULAR SUSPENSION, EXTENDED REL SYRING 675 MG/2.4 ML	4	
ARISTADA INTRAMUSCULAR SUSPENSION, EXTENDED REL SYRING 1,064 MG/3.9 ML, 441 MG/1.6 ML, 662 MG/2.4 ML, 882 MG/3.2 ML	4	

Drug Name	Tier	Requirements / Limits
<i>armodafinil oral tablet 150 mg, 200 mg, 250 mg, 50 mg</i>	4	
<i>asenapine maleate sublingual tablet 10 mg, 2.5 mg, 5 mg</i>	4	
ATIVAN ORAL TABLET 0.5 MG, 1 MG, 2 MG	4	
<i>atomoxetine oral capsule 10 mg, 100 mg, 18 mg, 25 mg, 40 mg, 60 mg, 80 mg</i>	1	
AUVELITY ORAL TABLET, IR AND ER, BIPHASIC 45-105 MG	4	ST
AZSTARYS ORAL CAPSULE 26.1 MG- 5.2 MG, 39.2 MG- 7.8 MG, 52.3 MG- 10.4 MG	4	PA
BELSOMRA ORAL TABLET 10 MG, 15 MG, 20 MG, 5 MG	4	PA
BUCAPSOL ORAL CAPSULE 10 MG, 15 MG, 7.5 MG	EX	
<i>bupropion hcl oral tablet 100 mg, 75 mg</i>	1	
<i>bupropion hcl oral tablet extended release 24 hr 150 mg, 300 mg</i>	1	
BUPROPION HCL ORAL TABLET EXTENDED RELEASE 24 HR 450 MG	EX	
<i>bupropion hcl oral tablet sustained-release 12 hr 100 mg, 150 mg, 200 mg</i>	1	
<i>bupirone oral tablet 10 mg, 15 mg, 30 mg, 5 mg, 7.5 mg</i>	1	
CAPLYTA ORAL CAPSULE 10.5 MG, 21 MG, 42 MG	4	ST
CELEXA ORAL TABLET 10 MG, 20 MG, 40 MG	4	ST
<i>chlordiazepoxide hcl oral capsule 10 mg, 25 mg, 5 mg</i>	1	
<i>chlorpromazine oral concentrate 100 mg/ml, 30 mg/ml</i>	4	
<i>chlorpromazine oral tablet 10 mg, 100 mg, 200 mg, 25 mg, 50 mg</i>	4	
CITALOPRAM ORAL CAPSULE 30 MG	EX	
<i>citalopram oral solution 10 mg/5 ml</i>	1	
<i>citalopram oral tablet 10 mg, 20 mg, 40 mg</i>	1	
<i>clomipramine oral capsule 25 mg, 50 mg, 75 mg</i>	1	
<i>clonidine hcl oral tablet extended release 12 hr 0.1 mg</i>	1	

Drug Name	Tier	Requirements / Limits
<i>clorazepate dipotassium oral tablet 15 mg, 3.75 mg, 7.5 mg</i>	1	
<i>clozapine oral tablet 100 mg, 200 mg, 25 mg, 50 mg</i>	1	
<i>clozapine oral tablet, disintegrating 100 mg, 12.5 mg, 150 mg, 200 mg, 25 mg</i>	1	
CLOZARIL ORAL TABLET 100 MG, 25 MG	4	ST
COBENFY ORAL CAPSULE 100-20 MG, 125-30 MG, 50-20 MG	4	PA
COBENFY STARTER PACK ORAL CAPSULE, DOSE PACK 50 MG-20 MG /100 MG-20 MG	4	PA
CONCERTA ORAL TABLET EXTENDED RELEASE 24HR 18 MG, 27 MG, 36 MG, 54 MG	EX	
COTEMPLA XR-ODT ORAL TABLET, DISINTEG ER BIPHASE 24H 17.3 MG, 25.9 MG, 8.6 MG	4	PA
DAYTRANA TRANSDERMAL PATCH 24 HOUR 10 MG/9 HR, 15 MG/9 HR, 20 MG/9 HR, 30 MG/9 HR	4	PA
DAYVIGO ORAL TABLET 10 MG, 5 MG	4	PA
<i>desipramine oral tablet 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg</i>	1	
DESOXYN ORAL TABLET 5 MG	4	PA
DESVENLAFAXINE ORAL TABLET EXTENDED RELEASE 24 HR 100 MG, 50 MG	4	ST
<i>desvenlafaxine succinate oral tablet extended release 24 hr 100 mg, 25 mg, 50 mg</i>	4	
DEXEDRINE SPANSULE ORAL CAPSULE, EXTENDED RELEASE 10 MG, 15 MG	4	PA
<i>dexmethylphenidate oral capsule, er biphasic 50-50 10 mg, 15 mg, 20 mg, 25 mg, 30 mg, 35 mg, 40 mg, 5 mg</i>	1	
<i>dexmethylphenidate oral tablet 10 mg, 2.5 mg, 5 mg</i>	1	
<i>dextroamphetamine sulfate oral capsule, extended release 10 mg, 15 mg, 5 mg</i>	1	
<i>dextroamphetamine sulfate oral solution 5 mg/5 ml</i>	1	
<i>dextroamphetamine sulfate oral tablet 10 mg, 5 mg</i>	1	
<i>dextroamphetamine sulfate oral tablet 15 mg, 2.5 mg, 20 mg, 30 mg, 7.5 mg</i>	4	

Drug Name	Tier	Requirements / Limits
<i>dextroamphetamine-amphetamine oral capsule, er triphasic 24 hr 12.5 mg, 25 mg, 37.5 mg, 50 mg</i>	4	
<i>dextroamphetamine-amphetamine oral capsule, extended release 24hr 10 mg, 15 mg, 20 mg, 25 mg, 30 mg, 5 mg</i>	1	
<i>dextroamphetamine-amphetamine oral tablet 10 mg, 12.5 mg, 15 mg, 20 mg, 30 mg, 5 mg, 7.5 mg</i>	1	
<i>diazepam intensol oral concentrate 5 mg/ml</i>	1	
<i>diazepam oral solution 5 mg/5 ml (1 mg/ml)</i>	1	
<i>diazepam oral tablet 10 mg, 2 mg, 5 mg</i>	1	
DORAL ORAL TABLET 15 MG	EX	
<i>doxepin oral capsule 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg</i>	1	
<i>doxepin oral concentrate 10 mg/ml</i>	1	
<i>doxepin oral tablet 3 mg, 6 mg</i>	4	
DRIZALMA ORAL CAPSULE, DELAYED REL SPRINKLE 20 MG, 30 MG, 40 MG, 60 MG	4	ST
<i>duloxetine oral capsule, delayed release(dr/ec) 20 mg, 30 mg, 40 mg, 60 mg</i>	1	
DYANAVEL XR ORAL SUSPEN, IR - ER, BIPHASIC 24HR 2.5 MG/ML	4	PA
DYANAVEL XR ORAL TABLET, IR - ER, BIPHASIC 24HR 10 MG, 15 MG, 20 MG, 5 MG	4	PA
EDLUAR SUBLINGUAL TABLET 10 MG, 5 MG	EX	
EFFEXOR XR ORAL CAPSULE, EXTENDED RELEASE 24HR 150 MG, 37.5 MG, 75 MG	EX	
EMSAM TRANSDERMAL PATCH 24 HOUR 12 MG/24 HR, 6 MG/24 HR, 9 MG/24 HR	4	ST
<i>ergoloid oral tablet 1 mg</i>	1	
ERZOFRI INTRAMUSCULAR SYRINGE 117 MG/0.75 ML, 156 MG/ML, 234 MG/1.5 ML, 351 MG/2.25 ML, 39 MG/0.25 ML, 78 MG/0.5 ML	4	
<i>escitalopram 10 mg/10 ml cup inner 5 mg/5 ml</i>	EX	
<i>escitalopram oxalate oral solution 5 mg/5 ml</i>	1	
<i>escitalopram oxalate oral tablet 10 mg, 20 mg, 5 mg</i>	1	
<i>estazolam oral tablet 1 mg, 2 mg</i>	1	
<i>eszopiclone oral tablet 1 mg, 2 mg, 3 mg</i>	4	

Drug Name	Tier	Requirements / Limits
EVEKEO ORAL TABLET 10 MG, 5 MG	4	PA
FANAPT ORAL TABLET 1 MG, 10 MG, 12 MG, 2 MG, 4 MG, 6 MG, 8 MG	4	ST
FANAPT TITRATION PACK A ORAL TABLETS, DOSE PACK 1MG(2)-2MG(2)-4MG(2)-6MG(2)	4	ST
FETZIMA ORAL CAPSULE, EXT REL 24HR DOSE PACK 20 MG (2)- 40 MG (26)	4	ST
FETZIMA ORAL CAPSULE, EXTENDED RELEASE 24 HR 120 MG, 20 MG, 40 MG, 80 MG	4	ST
<i>fluoxetine oral capsule 10 mg, 20 mg, 40 mg</i>	1	
<i>fluoxetine oral capsule, delayed release (dr/ec) 90 mg</i>	1	
<i>fluoxetine oral solution 20 mg/5 ml (4 mg/ml)</i>	1	
<i>fluoxetine oral tablet 10 mg, 20 mg</i>	1	
<i>fluoxetine oral tablet 60 mg</i>	1	PA
<i>fluphenazine hcl oral concentrate 5 mg/ml</i>	1	
<i>fluphenazine hcl oral elixir 2.5 mg/5 ml</i>	1	
<i>fluphenazine hcl oral tablet 1 mg, 10 mg, 2.5 mg, 5 mg</i>	1	
<i>flurazepam oral capsule 15 mg, 30 mg</i>	1	
<i>fluvoxamine oral capsule, extended release 24hr 100 mg, 150 mg</i>	1	
<i>fluvoxamine oral tablet 100 mg, 25 mg, 50 mg</i>	1	
FOCALIN ORAL TABLET 10 MG, 2.5 MG, 5 MG	EX	
FOCALIN XR ORAL CAPSULE, ER BIPHASIC 50-50 10 MG, 15 MG, 20 MG, 25 MG, 30 MG, 35 MG, 40 MG, 5 MG	EX	
FORFIVO XL ORAL TABLET EXTENDED RELEASE 24 HR 450 MG	EX	
GEODON INTRAMUSCULAR RECON SOLN 20 MG/ML (FINAL CONC.)	4	
GEODON ORAL CAPSULE 20 MG, 40 MG, 60 MG, 80 MG	4	ST
<i>guanfacine oral tablet extended release 24 hr 1 mg, 2 mg, 3 mg, 4 mg</i>	1	
HALCION ORAL TABLET 0.25 MG	4	

Drug Name	Tier	Requirements / Limits
HALDOL DECANOATE INTRAMUSCULAR SOLUTION 100 MG/ML	4	
<i>haloperidol decanoate intramuscular solution 100 mg/ml, 50 mg/ml</i>	1	
<i>haloperidol lactate injection solution 5 mg/ml</i>	4	
<i>haloperidol lactate intramuscular syringe 5 mg/ml</i>	4	
<i>haloperidol lactate oral concentrate 2 mg/ml</i>	1	
<i>haloperidol oral tablet 0.5 mg, 1 mg, 10 mg, 2 mg, 20 mg, 5 mg</i>	1	
HETLIOZ LQ ORAL SUSPENSION 4 MG/ML	4	PA; SP; LA
HETLIOZ ORAL CAPSULE 20 MG	EX	
<i>imipramine hcl oral tablet 10 mg, 25 mg, 50 mg</i>	1	
<i>imipramine pamoate oral capsule 100 mg, 125 mg, 150 mg, 75 mg</i>	4	
INTUNIV ER ORAL TABLET EXTENDED RELEASE 24 HR 1 MG, 2 MG, 3 MG, 4 MG	EX	
INVEGA HAFYERA INTRAMUSCULAR SYRINGE 1,092 MG/3.5 ML, 1,560 MG/5 ML	4	
INVEGA ORAL TABLET EXTENDED RELEASE 24HR 3 MG, 6 MG, 9 MG	4	ST
INVEGA SUSTENNA INTRAMUSCULAR SYRINGE 117 MG/0.75 ML, 156 MG/ML, 234 MG/1.5 ML, 39 MG/0.25 ML, 78 MG/0.5 ML	4	
INVEGA TRINZA INTRAMUSCULAR SYRINGE 273 MG/0.88 ML, 410 MG/1.32 ML, 546 MG/1.75 ML, 819 MG/2.63 ML	4	
JORNAY PM ORAL CAPSULE, DEL REL, EXT REL SPRINK 100 MG, 20 MG, 40 MG, 60 MG, 80 MG	4	PA
LATUDA ORAL TABLET 120 MG, 20 MG, 40 MG, 60 MG, 80 MG	EX	
LEXAPRO ORAL TABLET 10 MG, 20 MG, 5 MG	4	ST
<i>lisdexamfetamine oral capsule 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg, 70 mg</i>	1	
<i>lisdexamfetamine oral tablet, chewable 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg</i>	1	
<i>lithium carbonate oral capsule 150 mg, 300 mg, 600 mg</i>	1	
<i>lithium carbonate oral tablet 300 mg</i>	1	

Drug Name	Tier	Requirements / Limits
<i>lithium carbonate oral tablet extended release 300 mg, 450 mg</i>	1	
<i>lithium citrate oral solution 8 meq/5 ml</i>	1	
LITHOBID ORAL TABLET EXTENDED RELEASE 300 MG	4	
<i>lorazepam intensol oral concentrate 2 mg/ml</i>	1	
<i>lorazepam oral concentrate 2 mg/ml</i>	1	
<i>lorazepam oral tablet 0.5 mg, 1 mg, 2 mg</i>	1	
LOREEV XR ORAL CAPSULE, EXTENDED RELEASE 24HR 1 MG, 1.5 MG, 2 MG, 3 MG	EX	
<i>loxapine succinate oral capsule 10 mg, 25 mg, 50 mg, 50 mg</i>	1	
LUMRYZ ORAL EXTEND RELEASE GRANULES,PACKET 4.5 GRAM, 6 GRAM, 7.5 GRAM, 9 GRAM	4	PA; SP; LA; QL (30 per 30 days)
LUMRYZ STARTER PACK ORAL GRANULES ER PACKET, DOSE PACK 4.5-6-7.5 GRAM	4	PA; SP; LA; QL (1 per 365 days)
LUNESTA ORAL TABLET 1 MG, 2 MG, 3 MG	EX	
<i>lurasidone oral tablet 120 mg, 20 mg, 40 mg, 60 mg, 80 mg</i>	4	
LYBALVI ORAL TABLET 10-10 MG, 15-10 MG, 20-10 MG, 5-10 MG	4	ST
MARPLAN ORAL TABLET 10 MG	4	
METADATE CD ORAL CAPSULE, ER BIPHASIC 30-70 10 MG, 20 MG, 30 MG, 40 MG, 50 MG, 60 MG	4	PA
<i>methamphetamine oral tablet 5 mg</i>	1	
METHYLIN ORAL SOLUTION 10 MG/5 ML, 5 MG/5 ML	4	PA
<i>methylphenidate hcl oral cap, er sprinkle, biphasic 40-60 10 mg, 15 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg</i>	4	
<i>methylphenidate hcl oral capsule, er biphasic 30-70 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg</i>	1	
<i>methylphenidate hcl oral capsule, er biphasic 50-50 10 mg, 20 mg, 30 mg, 40 mg, 60 mg</i>	1	
<i>methylphenidate hcl oral solution 10 mg/5 ml, 5 mg/5 ml</i>	1	
<i>methylphenidate hcl oral tablet 10 mg, 20 mg, 5 mg</i>	1	

Drug Name	Tier	Requirements / Limits
<i>methylphenidate hcl oral tablet extended release 10 mg, 20 mg</i>	1	
<i>methylphenidate hcl oral tablet extended release 24hr 18 mg, 27 mg, 36 mg, 54 mg</i>	1	
METHYLPHENIDATE HCL ORAL TABLET EXTENDED RELEASE 24HR 45 MG, 63 MG	4	PA
<i>methylphenidate hcl oral tablet extended release 24hr 72 mg</i>	4	
<i>methylphenidate hcl oral tablet, chewable 10 mg, 2.5 mg, 5 mg</i>	1	
<i>methylphenidate transdermal patch 24 hour 10 mg/9 hr, 15 mg/9 hr, 20 mg/9 hr, 30 mg/9 hr</i>	4	
<i>midazolam oral syrup 2 mg/ml</i>	1	
<i>mirtazapine oral tablet 15 mg, 30 mg, 45 mg, 7.5 mg</i>	1	
<i>mirtazapine oral tablet, disintegrating 15 mg, 30 mg, 45 mg</i>	1	
<i>modafinil oral tablet 100 mg, 200 mg</i>	1	
<i>molindone oral tablet 10 mg, 25 mg, 5 mg</i>	1	
MYDAYIS ORAL CAPSULE, ER TRIPHASIC 24 HR 12.5 MG, 25 MG, 37.5 MG, 50 MG	4	PA
NARDIL ORAL TABLET 15 MG	4	
<i>nefazodone oral tablet 100 mg, 150 mg, 200 mg, 250 mg, 50 mg</i>	4	
<i>nortriptyline oral capsule 10 mg, 25 mg, 50 mg, 75 mg</i>	1	
<i>nortriptyline oral solution 10 mg/5 ml</i>	1	
NUPLAZID ORAL CAPSULE 34 MG	4	PA; SP; LA
NUPLAZID ORAL TABLET 10 MG	4	PA; SP; LA
NUVIGIL ORAL TABLET 150 MG, 200 MG, 250 MG, 50 MG	EX	
<i>olanzapine intramuscular recon soln 10 mg</i>	1	
<i>olanzapine oral tablet 10 mg, 15 mg, 2.5 mg, 20 mg, 5 mg, 7.5 mg</i>	1	
<i>olanzapine oral tablet, disintegrating 10 mg, 15 mg, 20 mg, 5 mg</i>	1	
<i>olanzapine-fluoxetine oral capsule 12-25 mg, 12-50 mg, 3-25 mg, 6-25 mg, 6-50 mg</i>	1	
ONYDA XR ORAL SUSPENSION, EXTEND RELEASE 24HR 0.1 MG/ML	4	PA

Drug Name	Tier	Requirements / Limits
OPIPZA ORAL FILM 10 MG, 2 MG, 5 MG	4	PA
<i>oxazepam oral capsule 10 mg, 15 mg, 30 mg</i>	1	
<i>paliperidone oral tablet extended release 24hr 1.5 mg, 3 mg, 6 mg, 9 mg</i>	1	
PAMELOR ORAL CAPSULE 10 MG, 25 MG, 50 MG, 75 MG	4	
PARNATE ORAL TABLET 10 MG	4	
<i>paroxetine hcl oral suspension 10 mg/5 ml</i>	4	
<i>paroxetine hcl oral tablet 10 mg, 20 mg, 30 mg, 40 mg</i>	1	
<i>paroxetine hcl oral tablet extended release 24 hr 12.5 mg, 25 mg, 37.5 mg</i>	1	
<i>paroxetine mesylate (menop.sym) oral capsule 7.5 mg</i>	1	
PAXIL CR ORAL TABLET EXTENDED RELEASE 24 HR 12.5 MG, 25 MG, 37.5 MG	4	ST
PAXIL ORAL SUSPENSION 10 MG/5 ML	4	ST
PAXIL ORAL TABLET 10 MG, 20 MG, 30 MG, 40 MG	4	ST
<i>perphenazine oral tablet 16 mg, 2 mg, 4 mg, 8 mg</i>	1	
<i>perphenazine-amitriptyline oral tablet 2-10 mg, 2-25 mg, 4-10 mg, 4-25 mg, 4-50 mg</i>	1	
PERSERIS SUBCUTANEOUS SUSPENSION, EXTENDED REL SYRING 120 MG, 90 MG	4	
<i>phenelzine oral tablet 15 mg</i>	1	
<i>pimozide oral tablet 1 mg, 2 mg</i>	1	
PRISTIQ ORAL TABLET EXTENDED RELEASE 24 HR 100 MG, 25 MG, 50 MG	EX	
<i>procentra oral solution 5 mg/5 ml</i>	1	
<i>protriptyline oral tablet 10 mg, 5 mg</i>	1	
PROVIGIL ORAL TABLET 100 MG, 200 MG	EX	
PROZAC ORAL CAPSULE 10 MG, 20 MG	EX	
QELBREE ORAL CAPSULE, EXTENDED RELEASE 24HR 100 MG, 150 MG, 200 MG	4	PA
QUAZEPAM ORAL TABLET 15 MG	EX	
<i>quetiapine oral tablet 100 mg, 200 mg, 25 mg, 300 mg, 400 mg, 50 mg</i>	1	
QUETIAPINE ORAL TABLET 150 MG	4	ST

Drug Name	Tier	Requirements / Limits
<i>quetiapine oral tablet extended release 24 hr 150 mg, 200 mg, 300 mg, 400 mg, 50 mg</i>	4	
QUILLICHEW ER ORAL TABLET, CHEW, IR-ER.BIPHASIC24HR 20 MG, 30 MG, 40 MG	4	PA
QUILLIVANT XR ORAL SUSPENSION, EXT REL 24HR, RECON 5 MG/ML (25 MG/5 ML)	4	PA
QUVIVIQ ORAL TABLET 25 MG, 50 MG	4	PA
RALDESY ORAL SOLUTION 10 MG/ML	EX	
<i>ramelteon oral tablet 8 mg</i>	4	
RELEXXII ORAL TABLET EXTENDED RELEASE 24HR 18 MG, 27 MG, 36 MG, 45 MG, 54 MG, 63 MG, 72 MG	4	PA
REMERON ORAL TABLET 15 MG, 30 MG	4	ST
REMERON SOLTAB ORAL TABLET, DISINTEGRATING 15 MG, 30 MG, 45 MG	4	ST
RESTORIL ORAL CAPSULE 15 MG, 22.5 MG, 30 MG, 7.5 MG	4	
REXULTI ORAL TABLET 0.25 MG, 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG	4	ST
RISPERDAL CONSTA INTRAMUSCULAR SUSPENSION, EXTENDED REL RECON 12.5 MG/2 ML, 25 MG/2 ML, 37.5 MG/2 ML, 50 MG/2 ML	4	
RISPERDAL ORAL SOLUTION 1 MG/ML	4	ST
RISPERDAL ORAL TABLET 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG	4	ST
<i>risperidone microspheres intramuscular suspension, extended rel recon 12.5 mg/2 ml, 25 mg/2 ml, 37.5 mg/2 ml, 50 mg/2 ml</i>	4	
<i>risperidone oral solution 1 mg/ml</i>	1	
<i>risperidone oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg</i>	1	
<i>risperidone oral tablet, disintegrating 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg</i>	1	
RITALIN LA ORAL CAPSULE, ER BIPHASIC 50-50 10 MG, 20 MG, 30 MG, 40 MG	4	PA
RITALIN ORAL TABLET 10 MG, 20 MG, 5 MG	4	PA
ROZEREM ORAL TABLET 8 MG	EX	

Drug Name	Tier	Requirements / Limits
RYKINDO INTRAMUSCULAR SUSPENSION, EXTENDED REL RECON 25 MG/2 ML, 37.5 MG/2 ML, 50 MG/2 ML	4	
SAPHRIS SUBLINGUAL TABLET 10 MG, 2.5 MG, 5 MG	EX	
SECUADO TRANSDERMAL PATCH 24 HOUR 3.8 MG/24 HOUR, 5.7 MG/24 HOUR, 7.6 MG/24 HOUR	4	ST
SEROQUEL ORAL TABLET 100 MG, 200 MG, 25 MG, 300 MG, 400 MG, 50 MG	EX	
SEROQUEL XR ORAL TABLET EXTENDED RELEASE 24 HR 150 MG, 200 MG, 300 MG, 400 MG, 50 MG	EX	
SERTRALINE ORAL CAPSULE 150 MG, 200 MG	EX	
<i>sertraline oral concentrate 20 mg/ml</i>	1	
<i>sertraline oral tablet 100 mg, 25 mg, 50 mg</i>	1	
SILENOR ORAL TABLET 3 MG, 6 MG	4	PA
SODIUM OXYBATE ORAL SOLUTION 500 MG/ML	4	PA; SP; LA; QL (3 per 30 days)
SPRAVATO NASAL SPRAY, NON-AEROSOL 56 MG (28 MG X 2), 84 MG (28 MG X 3)	4	PA; SP; QL (4 per 30 days)
SUNOSI ORAL TABLET 150 MG	4	PA; QL (30 per 30 days)
SUNOSI ORAL TABLET 75 MG	4	PA; QL (60 per 30 days)
<i>tasimelteon oral capsule 20 mg</i>	4	PA; SP; LA
<i>temazepam oral capsule 15 mg, 22.5 mg, 30 mg, 7.5 mg</i>	1	
<i>thioridazine oral tablet 10 mg, 100 mg, 25 mg, 50 mg</i>	1	
<i>thiothixene oral capsule 1 mg, 10 mg, 2 mg, 5 mg</i>	1	
<i>tranlycypromine oral tablet 10 mg</i>	1	
<i>trazodone oral tablet 100 mg, 150 mg, 300 mg, 50 mg</i>	1	
<i>triazolam oral tablet 0.125 mg, 0.25 mg</i>	1	
<i>trifluoperazine oral tablet 1 mg, 10 mg, 2 mg, 5 mg</i>	1	
<i>trimipramine oral capsule 100 mg, 25 mg, 50 mg</i>	1	
TRINTELLIX ORAL TABLET 10 MG, 20 MG, 5 MG	4	ST

Drug Name	Tier	Requirements / Limits
UZEDY SUBCUTANEOUS SUSPENSION, EXTENDED REL SYRING 100 MG/0.28 ML, 125 MG/0.35 ML, 150 MG/0.42 ML, 200 MG/0.56 ML, 250 MG/0.7 ML, 50 MG/0.14 ML, 75 MG/0.21 ML	4	
VALIUM ORAL TABLET 10 MG, 2 MG, 5 MG	EX	
VENLAFAXINE BESYLATE ORAL TABLET EXTENDED RELEASE 24HR 112.5 MG	4	ST
<i>venlafaxine oral capsule, extended release 24hr 150 mg, 37.5 mg, 75 mg</i>	1	
<i>venlafaxine oral tablet 100 mg, 25 mg, 37.5 mg, 50 mg, 75 mg</i>	1	
<i>venlafaxine oral tablet extended release 24hr 150 mg, 225 mg, 37.5 mg, 75 mg</i>	1	
VERSACLOZ ORAL SUSPENSION 50 MG/ML	4	ST
VIIIBRYD ORAL TABLET 10 MG, 20 MG, 40 MG	EX	
<i>vilazodone oral tablet 10 mg, 20 mg, 40 mg</i>	4	
VRAYLAR ORAL CAPSULE 1.5 MG, 3 MG, 4.5 MG, 6 MG	4	ST
VYLEESI SUBCUTANEOUS AUTO-INJECTOR 1.75 MG/0.3 ML	4	PA; SP
VYVANSE ORAL CAPSULE 10 MG, 20 MG, 30 MG, 40 MG, 50 MG, 60 MG, 70 MG	4	PA
VYVANSE ORAL TABLET, CHEWABLE 10 MG, 20 MG, 30 MG, 40 MG, 50 MG, 60 MG	4	PA
WAKIX ORAL TABLET 17.8 MG, 4.45 MG	4	PA; SP; LA; QL (60 per 30 days)
WELLBUTRIN SR ORAL TABLET SUSTAINED-RELEASE 12 HR 100 MG, 150 MG, 200 MG	4	ST
WELLBUTRIN XL ORAL TABLET EXTENDED RELEASE 24 HR 150 MG, 300 MG	4	ST
XANAX ORAL TABLET 0.25 MG, 0.5 MG, 1 MG, 2 MG	EX	
XANAX XR ORAL TABLET EXTENDED RELEASE 24 HR 0.5 MG, 1 MG, 2 MG, 3 MG	EX	
XELSTRYM TRANSDERMAL PATCH 24 HOUR 13.5 MG/9 HOUR, 18 MG/9 HOUR, 4.5 MG/9 HOUR, 9 MG/9 HOUR	4	PA
XYREM ORAL SOLUTION 500 MG/ML	4	PA; SP; LA; QL (3 per 30 days)
XYWAV ORAL SOLUTION 0.5 GRAM/ML	4	PA; SP; LA; QL (3 per 30 days)

Drug Name	Tier	Requirements / Limits
<i>zaleplon oral capsule 10 mg, 5 mg</i>	1	
<i>zenzedi oral tablet 10 mg, 5 mg</i>	4	PA
ZENZEDI ORAL TABLET 15 MG, 20 MG, 30 MG, 7.5 MG	EX	
ZENZEDI ORAL TABLET 2.5 MG	4	PA
<i>ziprasidone hcl oral capsule 20 mg, 40 mg, 60 mg, 80 mg</i>	1	
<i>ziprasidone mesylate intramuscular recon soln 20 mg/ml (final conc.)</i>	4	
ZOLOFT ORAL CONCENTRATE 20 MG/ML	4	ST
ZOLOFT ORAL TABLET 100 MG, 25 MG, 50 MG	4	ST
ZOLPIDEM ORAL CAPSULE 7.5 MG	EX	
<i>zolpidem oral tablet 10 mg, 5 mg</i>	1	
<i>zolpidem oral tablet, ext release multiphase 12.5 mg, 6.25 mg</i>	1	
<i>zolpidem sublingual tablet 1.75 mg, 3.5 mg</i>	1	
ZURZUVAE ORAL CAPSULE 20 MG, 25 MG, 30 MG	4	PA; SP
ZYPREXA ORAL TABLET 2.5 MG, 20 MG, 5 MG	4	ST

AUTONOMIC & CNS DRUGS, NEUROLOGY

MULTIPLE SCLEROSIS AGENTS

AUBAGIO ORAL TABLET 14 MG, 7 MG	EX	
AVONEX INTRAMUSCULAR PEN INJECTOR KIT 30 MCG/0.5 ML	3	PA; SP; LA; QL (1 per 30 days)
AVONEX INTRAMUSCULAR SYRINGE KIT 30 MCG/0.5 ML	3	PA; SP; LA; QL (1 per 30 days)
BAFIERTAM ORAL CAPSULE, DELAYED RELEASE (DR/EC) 95 MG	4	PA; SP; LA; QL (120 per 30 days)
BETASERON SUBCUTANEOUS KIT 0.3 MG	3	PA; SP; LA; QL (14 per 30 days)
COPAXONE SUBCUTANEOUS SYRINGE 20 MG/ML	4	PA; SP; LA; QL (30 per 30 days)
COPAXONE SUBCUTANEOUS SYRINGE 40 MG/ML	4	PA; SP; LA; QL (12 per 30 days)
<i>dimethyl fumarate oral capsule, delayed release (dr/ec) 120 mg</i>	3	PA; SP; LA; QL (14 per 365 days)
<i>dimethyl fumarate oral capsule, delayed release (dr/ec) 120 mg (14)- 240 mg (46)</i>	3	PA; SP; LA; QL (1 per 365 days)

Drug Name	Tier	Requirements / Limits
<i>dimethyl fumarate oral capsule, delayed release (dr/ec) 240 mg</i>	3	PA; SP; LA; QL (60 per 30 days)
<i>fingolimod oral capsule 0.5 mg</i>	3	PA; SP; LA; QL (30 per 30 days)
GILENYA ORAL CAPSULE 0.25 MG, 0.5 MG	4	PA; SP; LA; QL (30 per 30 days)
<i>glatiramer subcutaneous syringe 20 mg/ml</i>	3	PA; SP; LA; QL (30 per 30 days)
<i>glatiramer subcutaneous syringe 40 mg/ml</i>	3	PA; SP; LA; QL (12 per 30 days)
<i>glatopa subcutaneous syringe 20 mg/ml</i>	3	PA; SP; LA; QL (30 per 30 days)
<i>glatopa subcutaneous syringe 40 mg/ml</i>	3	PA; SP; LA; QL (12 per 30 days)
KESIMPTA SUBCUTANEOUS PEN INJECTOR 20 MG/0.4 ML	3	PA; SP; LA; QL (1 per 30 days)
MAVENCLAD (10 TABLET PACK) ORAL TABLET 10 MG	4	PA; SP; LA; QL (40 per 720 days)
MAVENCLAD (4 TABLET PACK) ORAL TABLET 10 MG	4	PA; SP; LA; QL (16 per 720 days)
MAVENCLAD (5 TABLET PACK) ORAL TABLET 10 MG	4	PA; SP; LA; QL (20 per 720 days)
MAVENCLAD (6 TABLET PACK) ORAL TABLET 10 MG	4	PA; SP; LA; QL (24 per 720 days)
MAVENCLAD (7 TABLET PACK) ORAL TABLET 10 MG	4	PA; SP; LA; QL (28 per 720 days)
MAVENCLAD (8 TABLET PACK) ORAL TABLET 10 MG	4	PA; SP; LA; QL (32 per 720 days)
MAVENCLAD (9 TABLET PACK) ORAL TABLET 10 MG	4	PA; SP; LA; QL (36 per 720 days)
MAYZENT ORAL TABLET 0.25 MG, 1 MG, 2 MG	3	PA; SP; LA; QL (30 per 30 days)
MAYZENT STARTER(FOR 1MG MAINT) ORAL TABLETS, DOSE PACK 0.25 MG (7 TABS)	3	PA; SP; LA; QL (1 per 365 days)
MAYZENT STARTER(FOR 2MG MAINT) ORAL TABLETS, DOSE PACK 0.25 MG (12 TABS)	3	PA; SP; LA; QL (1 per 365 days)
PLEGRIDY INTRAMUSCULAR SYRINGE 125 MCG/0.5 ML	3	PA; SP; LA; QL (2 per 30 days)
PLEGRIDY SUBCUTANEOUS PEN INJECTOR 125 MCG/0.5 ML	3	PA; SP; LA; QL (2 per 30 days)
PLEGRIDY SUBCUTANEOUS PEN INJECTOR 63 MCG/0.5 ML- 94 MCG/0.5 ML	3	PA; SP; LA; QL (1 per 365 days)
PLEGRIDY SUBCUTANEOUS SYRINGE 125 MCG/0.5 ML	3	PA; SP; LA; QL (2 per 30 days)

Drug Name	Tier	Requirements / Limits
PLEGRIDY SUBCUTANEOUS SYRINGE 63 MCG/0.5 ML- 94 MCG/0.5 ML	3	PA; SP; LA; QL (1 per 365 days)
PONVORY 14-DAY STARTER PACK ORAL TABLETS, DOSE PACK 2 MG (2) - 10 MG (3)	4	PA; SP; LA; QL (14 per 365 days)
PONVORY ORAL TABLET 20 MG	4	PA; SP; LA; QL (30 per 30 days)
REBIF (WITH ALBUMIN) SUBCUTANEOUS SYRINGE 22 MCG/0.5 ML, 44 MCG/0.5 ML	3	PA; SP; LA; QL (12 per 30 days)
REBIF REBIDOSE SUBCUTANEOUS PEN INJECTOR 22 MCG/0.5 ML, 44 MCG/0.5 ML	3	PA; SP; LA; QL (12 per 30 days)
REBIF REBIDOSE SUBCUTANEOUS PEN INJECTOR 8.8MCG/0.2ML-22 MCG/0.5ML (6)	3	PA; SP; LA; QL (4.2 per 30 days)
REBIF TITRATION PACK SUBCUTANEOUS SYRINGE 8.8MCG/0.2ML-22 MCG/0.5ML (6)	3	PA; SP; LA; QL (4.2 per 30 days)
TASCENSO ODT ORAL TABLET, DISINTEGRATING 0.25 MG, 0.5 MG	4	PA; SP; LA; QL (30 per 30 days)
TECFIDERA ORAL CAPSULE, DELAYED RELEASE (DR/EC) 120 MG	4	PA; SP; LA; QL (14 per 365 days)
TECFIDERA ORAL CAPSULE, DELAYED RELEASE (DR/EC) 120 MG (14)- 240 MG (46)	4	PA; SP; LA; QL (1 per 365 days)
TECFIDERA ORAL CAPSULE, DELAYED RELEASE (DR/EC) 240 MG	4	PA; SP; LA; QL (60 per 30 days)
<i>teriflunomide oral tablet 14 mg, 7 mg</i>	4	PA; SP; LA; QL (30 per 30 days)
VUMERITY ORAL CAPSULE, DELAYED RELEASE(DR/EC) 231 MG	4	PA; SP; LA; QL (120 per 30 days)

CARDIOVASCULAR, HYPERTENSION & LIPIDS

ANTIARRHYTHMIC AGENTS

<i>amiodarone oral tablet 100 mg, 200 mg, 400 mg</i>	1	
BETAPACE AF ORAL TABLET 120 MG, 160 MG, 80 MG	4	
BETAPACE ORAL TABLET 120 MG, 160 MG, 240 MG, 80 MG	4	
<i>disopyramide phosphate oral capsule 100 mg</i>	1	
<i>disopyramide phosphate oral capsule 150 mg</i>	EX	
<i>dofetilide oral capsule 125 mcg, 250 mcg, 500 mcg</i>	4	
<i>flecainide oral tablet 100 mg, 150 mg, 50 mg</i>	1	
<i>mexiletine oral capsule 150 mg, 200 mg, 250 mg</i>	1	
MULTAQ ORAL TABLET 400 MG	4	
NORPACE CR ORAL CAPSULE, EXTENDED RELEASE 100 MG, 150 MG	4	

Drug Name	Tier	Requirements / Limits
NORPACE ORAL CAPSULE 100 MG, 150 MG	EX	
<i>pacerone oral tablet 100 mg, 200 mg</i>	1	
<i>propafenone oral capsule, extended release 12 hr 225 mg, 325 mg, 425 mg</i>	1	
<i>propafenone oral tablet 150 mg, 225 mg, 300 mg</i>	1	
<i>quinidine gluconate oral tablet extended release 324 mg</i>	1	
<i>quinidine sulfate oral tablet 200 mg, 300 mg</i>	1	
<i>sotalol af oral tablet 120 mg, 160 mg, 80 mg</i>	1	
<i>sotalol oral tablet 120 mg, 160 mg, 240 mg, 80 mg</i>	1	
SOTYLIZE ORAL SOLUTION 5 MG/ML	4	
TIKOSYN ORAL CAPSULE 125 MCG, 250 MCG, 500 MCG	EX	
ANTIHYPERTENSIVE THERAPY		
ACCUPRIL ORAL TABLET 10 MG, 20 MG, 40 MG, 5 MG	4	ST
ACCURETIC ORAL TABLET 10-12.5 MG, 20-12.5 MG, 20-25 MG	4	ST
<i>acebutolol oral capsule 200 mg, 400 mg</i>	1	
ALDACTONE ORAL TABLET 100 MG, 25 MG, 50 MG	4	
<i>aliskiren oral tablet 150 mg, 300 mg</i>	4	
ALTACE ORAL CAPSULE 1.25 MG, 2.5 MG, 5 MG	4	ST
<i>amiloride oral tablet 5 mg</i>	1	
<i>amiloride-hydrochlorothiazide oral tablet 5-50 mg</i>	1	
<i>amlodipine oral tablet 10 mg, 2.5 mg, 5 mg</i>	1	
<i>amlodipine-benazepril oral capsule 10-20 mg, 10-40 mg, 2.5-10 mg, 5-10 mg, 5-20 mg, 5-40 mg</i>	1	
<i>amlodipine-olmesartan oral tablet 10-20 mg, 10-40 mg, 5-20 mg, 5-40 mg</i>	4	
<i>amlodipine-valsartan oral tablet 10-160 mg, 10-320 mg, 5-160 mg, 5-320 mg</i>	1	
<i>amlodipine-valsartan-hctiazid oral tablet 10-160-12.5 mg, 10-160-25 mg, 10-320-25 mg, 5-160-12.5 mg, 5-160-25 mg</i>	1	
ARBLI ORAL SUSPENSION 10 MG/ML	EX	
ATACAND HCT ORAL TABLET 16-12.5 MG, 32-12.5 MG, 32-25 MG	EX	

Drug Name	Tier	Requirements / Limits
ATACAND ORAL TABLET 16 MG, 32 MG, 4 MG, 8 MG	EX	
<i>atenolol oral tablet 100 mg, 25 mg, 50 mg</i>	1	
<i>atenolol-chlorthalidone oral tablet 100-25 mg, 50-25 mg</i>	1	
AVALIDE ORAL TABLET 150-12.5 MG, 300-12.5 MG	EX	
AVAPRO ORAL TABLET 150 MG, 300 MG	EX	
AZOR ORAL TABLET 10-20 MG, 10-40 MG, 5-20 MG, 5-40 MG	EX	
<i>benazepril oral tablet 10 mg, 20 mg, 40 mg, 5 mg</i>	1	
<i>benazepril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg, 5-6.25 mg</i>	1	
BENICAR HCT ORAL TABLET 20-12.5 MG, 40-12.5 MG, 40-25 MG	EX	
BENICAR ORAL TABLET 20 MG, 40 MG, 5 MG	EX	
<i>betaxolol oral tablet 10 mg, 20 mg</i>	1	
BIDIL ORAL TABLET 20-37.5 MG	EX	
<i>bisoprolol fumarate oral tablet 10 mg, 5 mg</i>	EX	
BISOPROLOL FUMARATE ORAL TABLET 2.5 MG	EX	
<i>bisoprolol-hydrochlorothiazide oral tablet 10-6.25 mg, 2.5-6.25 mg, 5-6.25 mg</i>	1	
<i>bumetanide oral tablet 0.5 mg, 1 mg, 2 mg</i>	1	
BYSTOLIC ORAL TABLET 10 MG, 2.5 MG, 20 MG, 5 MG	4	PA
<i>candesartan oral tablet 16 mg, 32 mg, 4 mg, 8 mg</i>	1	
<i>candesartan-hydrochlorothiazid oral tablet 16-12.5 mg, 32-12.5 mg, 32-25 mg</i>	1	
<i>captopril oral tablet 100 mg, 12.5 mg, 25 mg, 50 mg</i>	1	
<i>captopril-hydrochlorothiazide oral tablet 25-15 mg, 25-25 mg, 50-15 mg, 50-25 mg</i>	1	
CARDIZEM CD ORAL CAPSULE, EXTENDED RELEASE 24HR 120 MG, 180 MG, 240 MG, 300 MG, 360 MG	4	ST
CARDIZEM LA ORAL TABLET EXTENDED RELEASE 24 HR 120 MG, 180 MG, 240 MG, 300 MG, 360 MG, 420 MG	4	ST

Drug Name	Tier	Requirements / Limits
CARDIZEM ORAL TABLET 120 MG, 30 MG, 60 MG	4	ST
CARDURA ORAL TABLET 1 MG, 2 MG, 4 MG, 8 MG	4	PA
CARDURA XL ORAL TABLET EXTENDED RELEASE 24HR 4 MG, 8 MG	4	PA
CAROSPIR ORAL SUSPENSION 25 MG/5 ML	EX	
<i>cartia xt oral capsule, extended release 24hr 120 mg, 180 mg, 240 mg, 300 mg</i>	1	
<i>carvedilol oral tablet 12.5 mg, 25 mg, 3.125 mg, 6.25 mg</i>	1	
<i>carvedilol phosphate oral capsule, er multiphase 24 hr 10 mg, 20 mg, 40 mg, 80 mg</i>	1	
CATAPRES-TTS-1 TRANSDERMAL PATCH WEEKLY 0.1 MG/24 HR	EX	
CATAPRES-TTS-2 TRANSDERMAL PATCH WEEKLY 0.2 MG/24 HR	EX	
CATAPRES-TTS-3 TRANSDERMAL PATCH WEEKLY 0.3 MG/24 HR	EX	
<i>chlorthalidone oral tablet 25 mg, 50 mg</i>	1	
<i>clonidine hcl oral tablet 0.1 mg, 0.2 mg, 0.3 mg</i>	1	
CLONIDINE HCL ORAL TABLET EXTENDED RELEASE 24 HR 0.17 MG	4	
<i>clonidine transdermal patch weekly 0.1 mg/24 hr, 0.2 mg/24 hr, 0.3 mg/24 hr</i>	4	
CONJUPRI ORAL TABLET 2.5 MG, 5 MG	4	ST
CONSENSI ORAL TABLET 10-200 MG, 2.5-200 MG, 5-200 MG	EX	
COREG CR ORAL CAPSULE, ER MULTIPHASE 24 HR 10 MG, 20 MG, 40 MG, 80 MG	EX	
COREG ORAL TABLET 12.5 MG, 25 MG, 3.125 MG, 6.25 MG	EX	
COZAAR ORAL TABLET 100 MG, 25 MG, 50 MG	EX	
DEMSER ORAL CAPSULE 250 MG	EX	
DIBENZYLINE ORAL CAPSULE 10 MG	4	
<i>diltiazem hcl oral capsule, ext.rel 24h degradable 120 mg, 180 mg, 240 mg</i>	1	

Drug Name	Tier	Requirements / Limits
<i>diltiazem hcl oral capsule, extended release 12 hr 120 mg, 60 mg, 90 mg</i>	1	
<i>diltiazem hcl oral capsule, extended release 24 hr 180 mg, 240 mg, 300 mg, 360 mg, 420 mg</i>	1	
<i>diltiazem hcl oral capsule, extended release 24hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg</i>	1	
<i>diltiazem hcl oral tablet 120 mg, 30 mg, 60 mg, 90 mg</i>	1	
<i>diltiazem hcl oral tablet extended release 24 hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg</i>	1	
<i>dilt-xr oral capsule, ext.rel 24h degradable 120 mg, 180 mg, 240 mg</i>	1	
DIOVAN HCT ORAL TABLET 160-12.5 MG, 160-25 MG, 320-12.5 MG, 320-25 MG, 80-12.5 MG	EX	
DIOVAN ORAL TABLET 160 MG, 320 MG, 40 MG, 80 MG	EX	
DIURIL ORAL SUSPENSION 250 MG/5 ML	4	
<i>doxazosin oral tablet 1 mg, 2 mg, 4 mg, 8 mg</i>	1	
DYRENIUM ORAL CAPSULE 100 MG, 50 MG	4	
EDARBI ORAL TABLET 40 MG, 80 MG	EX	
EDARBYCLOR ORAL TABLET 40-12.5 MG, 40-25 MG	EX	
EDECRIN ORAL TABLET 25 MG	4	
<i>enalapril maleate oral solution 1 mg/ml</i>	4	
<i>enalapril maleate oral tablet 10 mg, 2.5 mg, 20 mg, 5 mg</i>	1	
<i>enalapril-hydrochlorothiazide oral tablet 10-25 mg, 5-12.5 mg</i>	1	
EPANED ORAL SOLUTION 1 MG/ML	4	ST
<i>eplerenone oral tablet 25 mg, 50 mg</i>	1	
<i>eprosartan oral tablet 600 mg</i>	1	
<i>ethacrynic acid oral tablet 25 mg</i>	4	
EXFORGE HCT ORAL TABLET 10-160-12.5 MG, 10-160-25 MG, 10-320-25 MG, 5-160-12.5 MG, 5-160-25 MG	EX	
EXFORGE ORAL TABLET 10-160 MG, 10-320 MG, 5-160 MG, 5-320 MG	EX	
<i>felodipine oral tablet extended release 24 hr 10 mg, 2.5 mg, 5 mg</i>	1	

Drug Name	Tier	Requirements / Limits
<i>fosinopril oral tablet 10 mg, 20 mg, 40 mg</i>	1	
<i>fosinopril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg</i>	1	
<i>furosemide oral solution 10 mg/ml, 40 mg/5 ml (8 mg/ml)</i>	1	
<i>furosemide oral tablet 20 mg, 40 mg, 80 mg</i>	1	
<i>guanfacine oral tablet 1 mg, 2 mg</i>	1	
HEMANGEOL ORAL SOLUTION 4.28 MG/ML	EX	
HEMICLOR ORAL TABLET 12.5 MG	EX	
<i>hydralazine oral tablet 10 mg, 100 mg, 25 mg, 50 mg</i>	1	
<i>hydrochlorothiazide oral capsule 12.5 mg</i>	1	
<i>hydrochlorothiazide oral tablet 12.5 mg, 25 mg, 50 mg</i>	1	
HYZAAR ORAL TABLET 100-12.5 MG, 100-25 MG, 50-12.5 MG	EX	
<i>indapamide oral tablet 1.25 mg, 2.5 mg</i>	1	
INDERAL LA ORAL CAPSULE, EXTENDED RELEASE 24 HR 120 MG, 160 MG, 60 MG, 80 MG	EX	
INDERAL XL ORAL CAPSULE, EXTENDED RELEASE 24HR 120 MG, 80 MG	EX	
INNOPRAN XL ORAL CAPSULE, EXTENDED RELEASE 24HR 120 MG, 80 MG	EX	
INSPRA ORAL TABLET 25 MG, 50 MG	4	
INZIRQO ORAL SUSPENSION FOR RECONSTITUTION 10 MG/ML	EX	
<i>irbesartan oral tablet 150 mg, 300 mg, 75 mg</i>	1	
<i>irbesartan-hydrochlorothiazide oral tablet 150-12.5 mg, 300-12.5 mg</i>	1	
<i>isosorbide-hydralazine oral tablet 20-37.5 mg</i>	4	
<i>isradipine oral capsule 2.5 mg, 5 mg</i>	1	
KAPSPARGO SPRINKLE ORAL CAPSULE, SPRINKLE, ER 24HR 100 MG, 200 MG, 25 MG, 50 MG	EX	
KATERZIA ORAL SUSPENSION 1 MG/ML	EX	
KERENDIA ORAL TABLET 10 MG	4	PA; QL (60 per 30 days)
KERENDIA ORAL TABLET 20 MG	4	PA; QL (30 per 30 days)
<i>labetalol oral tablet 100 mg, 200 mg, 300 mg</i>	1	

Drug Name	Tier	Requirements / Limits
LABETALOL ORAL TABLET 400 MG	EX	
LASIX ORAL TABLET 20 MG, 40 MG, 80 MG	4	
LEVAMLODIPINE ORAL TABLET 2.5 MG, 5 MG	4	ST
<i>lisinopril oral tablet 10 mg, 2.5 mg, 20 mg, 30 mg, 40 mg, 5 mg</i>	1	
<i>lisinopril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg</i>	1	
LOPRESSOR ORAL TABLET 100 MG, 50 MG	4	
<i>losartan oral tablet 100 mg, 25 mg, 50 mg</i>	1	
<i>losartan-hydrochlorothiazide oral tablet 100-12.5 mg, 100-25 mg, 50-12.5 mg</i>	1	
LOTENSIN HCT ORAL TABLET 10-12.5 MG, 20-12.5 MG, 20-25 MG	4	ST
LOTENSIN ORAL TABLET 10 MG, 20 MG, 40 MG	4	ST
LOTREL ORAL CAPSULE 10-20 MG, 10-40 MG, 5-10 MG, 5-20 MG	EX	
<i>matzim la oral tablet extended release 24 hr 180 mg, 240 mg, 300 mg, 360 mg, 420 mg</i>	1	
<i>methyldopa oral tablet 250 mg, 500 mg</i>	1	
<i>methyldopa-hydrochlorothiazide oral tablet 250-15 mg, 250-25 mg</i>	4	
<i>metolazone oral tablet 10 mg, 2.5 mg, 5 mg</i>	1	
<i>metoprolol succinate oral tablet extended release 24 hr 100 mg, 200 mg, 25 mg, 50 mg</i>	1	
<i>metoprolol ta-hydrochlorothiaz oral tablet 100-25 mg, 100-50 mg, 50-25 mg</i>	1	
<i>metoprolol tartrate oral tablet 100 mg, 25 mg, 37.5 mg, 50 mg, 75 mg</i>	1	
<i>metyrosine oral capsule 250 mg</i>	4	
MICARDIS HCT ORAL TABLET 40-12.5 MG, 80-12.5 MG, 80-25 MG	EX	
MICARDIS ORAL TABLET 40 MG, 80 MG	EX	
<i>minoxidil oral tablet 10 mg, 2.5 mg</i>	1	
<i>moexipril oral tablet 15 mg, 7.5 mg</i>	1	
<i>nadolol oral tablet 20 mg, 40 mg, 80 mg</i>	4	
<i>nebivolol oral tablet 10 mg, 2.5 mg, 20 mg, 5 mg</i>	4	

Drug Name	Tier	Requirements / Limits
NEXICLON XR ORAL TABLET EXTENDED RELEASE 24 HR 0.17 MG	4	PA
<i>nicardipine oral capsule 20 mg, 30 mg</i>	1	
<i>nifedipine oral capsule 10 mg, 20 mg</i>	1	
<i>nifedipine oral tablet extended release 24hr 30 mg, 60 mg, 90 mg</i>	1	
<i>nifedipine oral tablet extended release 30 mg, 60 mg, 90 mg</i>	1	
<i>nimodipine oral capsule 30 mg</i>	1	
<i>nimodipine oral solution 60 mg/20 ml</i>	4	
<i>nisoldipine oral tablet extended release 24 hr 17 mg, 20 mg, 25.5 mg, 30 mg, 34 mg, 40 mg, 8.5 mg</i>	4	
NORLIQVA ORAL SOLUTION 1 MG/ML	4	ST
NORVASC ORAL TABLET 10 MG, 2.5 MG, 5 MG	EX	
NYMALIZE ORAL SOLUTION 60 MG/10 ML	4	
NYMALIZE ORAL SYRINGE 30 MG/5 ML, 60 MG/10 ML	4	
<i>olmesartan oral tablet 20 mg, 40 mg, 5 mg</i>	1	
<i>olmesartan-amlodipin-hcthiazyd oral tablet 20-5-12.5 mg, 40-10-12.5 mg, 40-10-25 mg, 40-5-12.5 mg, 40-5-25 mg</i>	4	
<i>olmesartan-hydrochlorothiazide oral tablet 20-12.5 mg, 40-12.5 mg, 40-25 mg</i>	1	
ORENITRAM MONTH 1 TITRATION KT ORAL TABLET EXTENDED REL, DOSE PACK 0.125 MG (126)- 0.25 MG (42)	4	PA; SP; LA
ORENITRAM MONTH 2 TITRATION KT ORAL TABLET EXTENDED REL, DOSE PACK 0.125 MG (126)- 0.25 MG (210)	4	PA; SP; LA
ORENITRAM MONTH 3 TITRATION KT ORAL TABLET EXTENDED REL, DOSE PACK 0.125 MG (126)- 0.25 MG(42)-1MG	4	PA; SP; LA
ORENITRAM ORAL TABLET EXTENDED RELEASE 0.125 MG, 0.25 MG, 1 MG, 2.5 MG, 5 MG	4	PA; SP; LA
<i>perindopril erbumine oral tablet 2 mg, 4 mg, 8 mg</i>	1	
<i>phenoxybenzamine oral capsule 10 mg</i>	4	
<i>pindolol oral tablet 10 mg, 5 mg</i>	1	
<i>prazosin oral capsule 1 mg, 2 mg, 5 mg</i>	1	

Drug Name	Tier	Requirements / Limits
PRESTALIA ORAL TABLET 14-10 MG, 3.5-2.5 MG, 7-5 MG	EX	
PROCARDIA XL ORAL TABLET EXTENDED RELEASE 24HR 30 MG, 60 MG, 90 MG	4	ST
<i>propranolol oral capsule, extended release 24 hr 120 mg, 160 mg, 60 mg, 80 mg</i>	1	
<i>propranolol oral solution 20 mg/5 ml (4 mg/ml), 40 mg/5 ml (8 mg/ml)</i>	1	
<i>propranolol oral tablet 10 mg, 20 mg, 40 mg, 60 mg, 80 mg</i>	1	
<i>propranolol-hydrochlorothiazid oral tablet 40-25 mg, 80-25 mg</i>	4	
QBRELIS ORAL SOLUTION 1 MG/ML	4	ST
<i>quinapril oral tablet 10 mg, 20 mg, 40 mg, 5 mg</i>	1	
<i>quinapril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg</i>	1	
<i>ramipril oral capsule 1.25 mg, 10 mg, 2.5 mg, 5 mg</i>	1	
SOANZ ORAL TABLET 40 MG	EX	
<i>spironolactone oral suspension 25 mg/5 ml</i>	4	
<i>spironolactone oral tablet 100 mg, 25 mg, 50 mg</i>	1	
<i>spironolacton-hydrochlorothiaz oral tablet 25-25 mg</i>	1	
SULAR ORAL TABLET EXTENDED RELEASE 24 HR 17 MG, 34 MG, 8.5 MG	4	ST
TEKTURNA ORAL TABLET 150 MG, 300 MG	4	ST
<i>telmisartan oral tablet 20 mg, 40 mg, 80 mg</i>	1	
<i>telmisartan-amlodipine oral tablet 40-10 mg, 40-5 mg, 80-10 mg, 80-5 mg</i>	1	
<i>telmisartan-hydrochlorothiazid oral tablet 40-12.5 mg, 80-12.5 mg, 80-25 mg</i>	1	
TENORETIC 100 ORAL TABLET 100-25 MG	4	
TENORETIC 50 ORAL TABLET 50-25 MG	4	
TENORMIN ORAL TABLET 100 MG, 25 MG, 50 MG	4	
<i>terazosin oral capsule 1 mg, 10 mg, 2 mg, 5 mg</i>	1	
THALITONE ORAL TABLET 15 MG	4	
<i>tiadylt er oral capsule, extended release 24 hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg</i>	1	

Drug Name	Tier	Requirements / Limits
TIAZAC ORAL CAPSULE, EXTENDED RELEASE 24 HR 120 MG, 180 MG, 240 MG, 300 MG, 360 MG, 420 MG	4	ST
<i>timolol maleate oral tablet 10 mg, 20 mg, 5 mg</i>	1	
TOPROL XL ORAL TABLET EXTENDED RELEASE 24 HR 100 MG, 200 MG, 25 MG, 50 MG	4	
<i>torseamide oral tablet 10 mg, 100 mg, 20 mg, 5 mg</i>	1	
<i>trandolapril oral tablet 1 mg, 2 mg, 4 mg</i>	1	
<i>trandolapril-verapamil oral tablet, ir - er, biphasic 24hr 1-240 mg, 2-180 mg, 2-240 mg, 4-240 mg</i>	4	
<i>triamterene oral capsule 100 mg, 50 mg</i>	4	
<i>triamterene-hydrochlorothiazid oral capsule 37.5-25 mg</i>	1	
<i>triamterene-hydrochlorothiazid oral tablet 37.5-25 mg, 75-50 mg</i>	1	
TRIBENZOR ORAL TABLET 20-5-12.5 MG, 40-10-12.5 MG, 40-10-25 MG, 40-5-12.5 MG, 40-5-25 MG	EX	
UPTRAVI ORAL TABLET 1,000 MCG, 1,200 MCG, 1,400 MCG, 1,600 MCG, 200 MCG, 400 MCG, 600 MCG, 800 MCG	4	PA; SP; LA
UPTRAVI ORAL TABLETS, DOSE PACK 200 MCG (140)- 800 MCG (60)	4	PA; SP; LA
VALSARTAN ORAL SOLUTION 4 MG/ML	4	ST
<i>valsartan oral tablet 160 mg, 320 mg, 40 mg, 80 mg</i>	1	
<i>valsartan-hydrochlorothiazide oral tablet 160-12.5 mg, 160-25 mg, 320-12.5 mg, 320-25 mg, 80-12.5 mg</i>	1	
VASERETIC ORAL TABLET 10-25 MG	4	ST
VASOTEC ORAL TABLET 10 MG, 2.5 MG, 20 MG, 5 MG	4	ST
<i>verapamil oral capsule, 24 hr er pellet ct 100 mg, 200 mg, 300 mg</i>	1	
<i>verapamil oral capsule, ext rel. pellets 24 hr 120 mg, 180 mg, 240 mg, 360 mg</i>	1	
<i>verapamil oral tablet 120 mg, 40 mg, 80 mg</i>	1	
<i>verapamil oral tablet extended release 120 mg, 180 mg, 240 mg</i>	1	

Drug Name	Tier	Requirements / Limits
ZESTORETIC ORAL TABLET 10-12.5 MG, 20-12.5 MG, 20-25 MG	4	ST
ZESTRIL ORAL TABLET 10 MG, 2.5 MG, 20 MG, 30 MG, 40 MG, 5 MG	4	ST
CARDIAC GLYCOSIDES		
<i>digoxin oral solution 50 mcg/ml (0.05 mg/ml)</i>	1	
<i>digoxin oral tablet 125 mcg (0.125 mg), 250 mcg (0.25 mg)</i>	1	
<i>digoxin oral tablet 62.5 mcg (0.0625 mg)</i>	4	
LANOXIN ORAL TABLET 125 MCG (0.125 MG), 250 MCG (0.25 MG), 62.5 MCG (0.0625 MG)	4	
COAGULATION THERAPY		
ALHEMO PEN SUBCUTANEOUS PEN INJECTOR 150 MG/1.5 ML (100 MG/ML), 300 MG/3 ML (100 MG/ML), 60 MG/1.5 ML (40 MG/ML)	4	PA; SP; LA; QL (4 per 30 days)
ALVAIZ ORAL TABLET 18 MG, 36 MG, 54 MG, 9 MG	4	PA; SP; LA; QL (60 per 30 days)
AMICAR ORAL SOLUTION 250 MG/ML (25 %)	4	
AMICAR ORAL TABLET 1,000 MG, 500 MG	4	
<i>aminocaproic acid oral solution 250 mg/ml (25 %)</i>	4	
<i>aminocaproic acid oral tablet 1,000 mg, 500 mg</i>	4	
ARIXTRA SUBCUTANEOUS SYRINGE 10 MG/0.8 ML, 2.5 MG/0.5 ML, 5 MG/0.4 ML, 7.5 MG/0.6 ML	4	SP
<i>aspirin-dipyridamole oral capsule, er multiphase 12 hr 25-200 mg</i>	1	
BRILINTA ORAL TABLET 60 MG, 90 MG	2	
CABLIVI INJECTION KIT 11 MG	3	PA; SP
<i>cilostazol oral tablet 100 mg, 50 mg</i>	1	
<i>clopidogrel oral tablet 300 mg, 75 mg</i>	1	
<i>dabigatran etexilate oral capsule 110 mg, 150 mg, 75 mg</i>	1	
<i>dipyridamole oral tablet 25 mg, 50 mg, 75 mg</i>	1	
DOPTELET ORAL TABLET 20 MG	3	PA; SP; LA
EFFIENT ORAL TABLET 10 MG, 5 MG	4	

Drug Name	Tier	Requirements / Limits
ELIQUIS DVT-PE TREAT 30D START ORAL TABLETS, DOSE PACK 5 MG (74 TABS)	2	
ELIQUIS ORAL TABLET 2.5 MG, 5 MG	2	
<i>eltrombopag olamine oral powder in packet 12.5 mg, 25 mg</i>	3	PA; SP; QL (30 per 30 days)
<i>eltrombopag olamine oral tablet 12.5 mg, 25 mg</i>	3	PA; SP; QL (30 per 30 days)
<i>eltrombopag olamine oral tablet 50 mg, 75 mg</i>	3	PA; SP; QL (60 per 30 days)
<i>enoxaparin subcutaneous solution 300 mg/3 ml</i>	3	SP
<i>enoxaparin subcutaneous syringe 100 mg/ml, 120 mg/0.8 ml, 150 mg/ml, 30 mg/0.3 ml, 40 mg/0.4 ml, 60 mg/0.6 ml, 80 mg/0.8 ml</i>	3	SP
<i>fondaparinux subcutaneous syringe 10 mg/0.8 ml, 2.5 mg/0.5 ml, 5 mg/0.4 ml, 7.5 mg/0.6 ml</i>	4	SP
FRAGMIN SUBCUTANEOUS SOLUTION 2,500 ANTI-XA UNIT/ML, 25,000 ANTI-XA UNIT/ML	4	SP
FRAGMIN SUBCUTANEOUS SYRINGE 10,000 ANTI-XA UNIT/ML, 12,500 ANTI-XA UNIT/0.5 ML, 15,000 ANTI-XA UNIT/0.6 ML, 18,000 ANTI-XA UNIT/0.72 ML, 2,500 ANTI-XA UNIT/0.2 ML, 5,000 ANTI-XA UNIT/0.2 ML, 7,500 ANTI-XA UNIT/0.3 ML	4	PA; SP
HEMLIBRA SUBCUTANEOUS SOLUTION 105 MG/0.7 ML, 12 MG/0.4 ML, 150 MG/ML, 30 MG/ML, 300 MG/2 ML (150 MG/ML), 60 MG/0.4 ML	3	PA; SP; LA; QL (2 per 30 days)
<i>hep flush-10 (pf) intravenous solution 10 unit/ml</i>	4	
<i>heparin (porcine) injection cartridge 5,000 unit/ml (1 ml)</i>	1	
<i>heparin (porcine) injection solution 1,000 unit/ml, 10,000 unit/ml, 20,000 unit/ml, 5,000 unit/ml</i>	1	
<i>heparin (porcine) injection syringe 5,000 unit/ml</i>	4	
<i>heparin lock flush (porcine) intravenous solution 10 unit/ml, 100 unit/ml</i>	4	
<i>heparin lock flush (porcine) (pf) intravenous syringe 10 unit/ml, 100 unit/ml</i>	4	
<i>heparin, porcine (pf) injection solution 1,000 unit/ml, 5,000 unit/0.5 ml</i>	1	
<i>heparin, porcine (pf) injection syringe 5,000 unit/0.5 ml</i>	1	

Drug Name	Tier	Requirements / Limits
<i>heparin, porcine (pf) intravenous solution 100 unit/ml (1 ml)</i>	4	
<i>heparin, porcine (pf) intravenous syringe 1 unit/ml, 100 unit/ml</i>	4	
HYMPAVZI PEN SUBCUTANEOUS PEN INJECTOR 150 MG/ML	4	PA; SP; LA; QL (4 per 30 days)
<i>jantoven oral tablet 1 mg, 10 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg</i>	1	
LOVENOX SUBCUTANEOUS SOLUTION 300 MG/3 ML	EX	
LOVENOX SUBCUTANEOUS SYRINGE 100 MG/ML, 120 MG/0.8 ML, 150 MG/ML, 30 MG/0.3 ML, 40 MG/0.4 ML, 60 MG/0.6 ML, 80 MG/0.8 ML	EX	
MULPLETA ORAL TABLET 3 MG	EX	
<i>pentoxifylline oral tablet extended release 400 mg</i>	1	
PHYTONADIONE (VITAMIN K1) INJECTION SOLUTION 1 MG/0.5 ML	4	
<i>phytonadione (vitamin k1) injection solution 10 mg/ml</i>	4	
<i>phytonadione (vitamin k1) oral tablet 5 mg</i>	1	
PLAVIX ORAL TABLET 75 MG	EX	
PRADAXA ORAL CAPSULE 110 MG, 150 MG, 75 MG	EX	
PRADAXA ORAL PELLETS IN PACKET 110 MG, 150 MG, 20 MG, 30 MG, 40 MG, 50 MG	EX	
<i>prasugrel hcl oral tablet 10 mg, 5 mg</i>	1	
PROMACTA ORAL POWDER IN PACKET 12.5 MG, 25 MG	4	PA; SP; LA
PROMACTA ORAL TABLET 12.5 MG, 25 MG, 50 MG, 75 MG	4	PA; SP; LA
QFITLIA PEN SUBCUTANEOUS PEN INJECTOR 50 MG/0.5 ML	4	PA; SP; QL (1 per 30 days)
QFITLIA SUBCUTANEOUS SOLUTION 20 MG/0.2 ML	4	PA; SP; QL (1 per 30 days)
<i>rivaroxaban oral tablet 2.5 mg</i>	4	
SAVAYSA ORAL TABLET 15 MG, 30 MG, 60 MG	EX	
TAVALISSE ORAL TABLET 100 MG, 150 MG	EX	
<i>ticagrelor oral tablet 60 mg, 90 mg</i>	1	

Drug Name	Tier	Requirements / Limits
<i>vitamin k injection solution 1 mg/0.5 ml</i>	4	
<i>vitamin k1 injection solution 10 mg/ml</i>	4	
<i>warfarin oral tablet 1 mg, 10 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg</i>	1	
XARELTO DVT-PE TREAT 30D START ORAL TABLETS, DOSE PACK 15 MG (42)- 20 MG (9)	2	
XARELTO ORAL SUSPENSION FOR RECONSTITUTION 1 MG/ML	2	
XARELTO ORAL TABLET 10 MG, 15 MG, 2.5 MG, 20 MG	2	
YOSPRALA ORAL TABLET, IR, DELAYED REL, BIPHASIC 325-40 MG, 81-40 MG	EX	
ZONTIVITY ORAL TABLET 2.08 MG	4	
LIPID/CHOLESTEROL LOWERING AGENTS		
ALTOPREV ORAL TABLET EXTENDED RELEASE 24 HR 20 MG, 40 MG, 60 MG	EX	
<i>amlodipine-atorvastatin oral tablet 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg, 2.5-10 mg, 2.5-20 mg, 2.5-40 mg, 5-10 mg, 5-20 mg, 5-40 mg, 5-80 mg</i>	4	
ATORVALIQ ORAL SUSPENSION 20 MG/5 ML (4 MG/ML)	4	PA
<i>atorvastatin oral tablet 10 mg, 20 mg, 40 mg, 80 mg</i>	1	ACA PV
CADUET ORAL TABLET 10-10 MG, 10-20 MG, 10-40 MG, 10-80 MG, 5-10 MG, 5-20 MG, 5-40 MG, 5-80 MG	4	ST
<i>cholestyramine (with sugar) oral powder 4 gram</i>	1	
<i>cholestyramine (with sugar) oral powder in packet 4 gram</i>	1	
<i>cholestyramine light oral powder 4 gram</i>	1	
<i>cholestyramine light oral powder in packet 4 gram</i>	1	
<i>colesevelam oral powder in packet 3.75 gram</i>	4	
<i>colesevelam oral tablet 625 mg</i>	4	
COLESTID ORAL GRANULES 5 GRAM	EX	
COLESTID ORAL TABLET 1 GRAM	EX	
<i>colestipol oral granules 5 gram</i>	1	
<i>colestipol oral packet 5 gram</i>	1	
<i>colestipol oral tablet 1 gram</i>	1	

Drug Name	Tier	Requirements / Limits
CRESTOR ORAL TABLET 10 MG, 20 MG, 40 MG, 5 MG	EX	
EZALLOR ORAL CAPSULE, SPRINKLE 10 MG, 20 MG, 40 MG, 5 MG	EX	
<i>ezetimibe oral tablet 10 mg</i>	1	
EZETIMIBE-ROSUVASTATIN ORAL TABLET 10-10 MG, 10-20 MG, 10-40 MG, 10-5 MG	4	PA
<i>ezetimibe-simvastatin oral tablet 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg</i>	1	
<i>fenofibrate micronized oral capsule 130 mg, 134 mg, 200 mg, 43 mg, 67 mg</i>	1	
FENOFIBRATE MICRONIZED ORAL CAPSULE 90 MG	EX	
<i>fenofibrate nanocrystallized oral tablet 145 mg, 48 mg</i>	1	
FENOFIBRATE ORAL CAPSULE 150 MG, 50 MG	EX	
<i>fenofibrate oral tablet 120 mg, 160 mg, 40 mg, 54 mg</i>	1	
<i>fenofibric acid (choline) oral capsule, delayed release (dr/ec) 135 mg, 45 mg</i>	1	
<i>fenofibric acid oral tablet 105 mg, 35 mg</i>	1	
FIBRICOR ORAL TABLET 105 MG	4	PA
FLOLIPID ORAL SUSPENSION 20 MG/5 ML (4 MG/ML), 40 MG/5 ML (8 MG/ML)	EX	
<i>fluvastatin oral capsule 20 mg, 40 mg</i>	4	ACA PV
<i>fluvastatin oral tablet extended release 24 hr 80 mg</i>	1	ACA PV
<i>gemfibrozil oral tablet 600 mg</i>	1	
<i>icosapent ethyl oral capsule 0.5 gram</i>	4	PA; QL (120 per 30 days)
<i>icosapent ethyl oral capsule 1 gram</i>	1	PA; QL (120 per 30 days)
JUXTAPID ORAL CAPSULE 10 MG, 20 MG, 30 MG, 5 MG	4	PA; SP; LA; QL (30 per 30 days)
LESCOL XL ORAL TABLET EXTENDED RELEASE 24 HR 80 MG	4	PA
LIPITOR ORAL TABLET 10 MG, 20 MG, 40 MG, 80 MG	EX	
LIPOFEN ORAL CAPSULE 150 MG, 50 MG	EX	
LIVALO ORAL TABLET 1 MG, 2 MG, 4 MG	EX	

Drug Name	Tier	Requirements / Limits
LOPID ORAL TABLET 600 MG	4	PA
<i>lovastatin oral tablet 10 mg, 20 mg, 40 mg</i>	1	ACA PV
LOVAZA ORAL CAPSULE 1 GRAM	4	PA; QL (120 per 30 days)
NEXLETOL ORAL TABLET 180 MG	4	PA
NEXLIZET ORAL TABLET 180-10 MG	4	PA
<i>niacin oral tablet 500 mg</i>	4	
<i>niacin oral tablet extended release 24 hr 1,000 mg, 500 mg, 750 mg</i>	1	
NIACOR ORAL TABLET 500 MG	4	ST
<i>omega-3 acid ethyl esters oral capsule 1 gram</i>	4	
<i>pitavastatin calcium oral tablet 1 mg, 2 mg, 4 mg</i>	4	ACA PV
PRALUENT PEN SUBCUTANEOUS PEN INJECTOR 150 MG/ML, 75 MG/ML	EX	
<i>pravastatin oral tablet 10 mg, 20 mg, 40 mg, 80 mg</i>	1	ACA PV
<i>prevalite oral powder 4 gram</i>	4	
<i>prevalite oral powder in packet 4 gram</i>	1	
QUESTRAN LIGHT ORAL POWDER 4 GRAM	4	
QUESTRAN ORAL POWDER 4 GRAM	4	
QUESTRAN ORAL POWDER IN PACKET 4 GRAM	4	
REPATHA PUSHTRONEX SUBCUTANEOUS WEARABLE INJECTOR 420 MG/3.5 ML	2	PA
REPATHA SURECLICK SUBCUTANEOUS PEN INJECTOR 140 MG/ML	2	PA
REPATHA SUBCUTANEOUS SYRINGE 140 MG/ML	2	PA
<i>rosuvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg</i>	1	ACA PV
ROSZET ORAL TABLET 10-10 MG, 10-20 MG, 10-40 MG, 10-5 MG	4	PA
<i>simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg, 80 mg</i>	1	ACA PV
TRICOR ORAL TABLET 145 MG, 48 MG	EX	
TRYNGOLZA SUBCUTANEOUS AUTO-INJECTOR 80 MG/0.8 ML	4	PA; SP
VASCEPA ORAL CAPSULE 0.5 GRAM, 1 GRAM	EX	

Drug Name	Tier	Requirements / Limits
VYTORIN ORAL TABLET 10-10 MG	EX	
VYTORIN ORAL TABLET 10-20 MG	EX	
VYTORIN ORAL TABLET 10-40 MG	EX	
VYTORIN ORAL TABLET 10-80 MG	EX	
WELCHOL ORAL POWDER IN PACKET 3.75 GRAM	EX	
WELCHOL ORAL TABLET 625 MG	EX	
ZETIA ORAL TABLET 10 MG	EX	
ZOCOR ORAL TABLET 10 MG, 20 MG, 40 MG	EX	
ZYPITAMAG ORAL TABLET 2 MG, 4 MG	EX	

MISCELLANEOUS CARDIOVASCULAR AGENTS

ASPRUZYO SPRINKLE ORAL EXTEND RELEASE GRANULES,PACKET 1,000 MG, 500 MG	EX	
ATTRUBY ORAL TABLET 356 MG	4	PA; SP
CAMZYOS ORAL CAPSULE 10 MG, 15 MG, 2.5 MG, 5 MG	4	PA; SP; LA
CORLANOR ORAL SOLUTION 5 MG/5 ML	4	PA; SP
CORLANOR ORAL TABLET 5 MG, 7.5 MG	EX	
ENTRESTO ORAL TABLET 24-26 MG, 49-51 MG, 97-103 MG	2	
ENTRESTO SPRINKLE ORAL PELLETT 15-16 MG, 6-6 MG	2	
FILSPARI ORAL TABLET 200 MG, 400 MG	4	PA; SP
<i>ivabradine oral tablet 5 mg, 7.5 mg</i>	4	PA
LODOCO ORAL TABLET 0.5 MG	4	PA
<i>ranolazine oral tablet extended release 12 hr 1,000 mg, 500 mg</i>	4	ST
TRYVIO ORAL TABLET 12.5 MG	4	PA; SP
VANRAFIA ORAL TABLET 0.75 MG	4	PA; SP
VECAMYL ORAL TABLET 2.5 MG	4	
VERQUVO ORAL TABLET 10 MG, 2.5 MG, 5 MG	4	PA
VYNDAMAX ORAL CAPSULE 61 MG	4	PA; SP; LA
VYNDAQEL ORAL CAPSULE 20 MG	4	PA; SP; LA

NITRATES

Drug Name	Tier	Requirements / Limits
GONITRO SUBLINGUAL POWDER IN PACKET 400 MCG	4	
ISORDIL ORAL TABLET 40 MG	EX	
ISORDIL TITRADOSE ORAL TABLET 5 MG	EX	
<i>isosorbide dinitrate oral tablet 10 mg, 20 mg, 30 mg, 40 mg, 5 mg</i>	1	
<i>isosorbide mononitrate oral tablet 10 mg, 20 mg</i>	1	
<i>isosorbide mononitrate oral tablet extended release 24 hr 120 mg, 30 mg, 60 mg</i>	1	
<i>nitro-bid transdermal ointment 2 %</i>	1	
NITRO-DUR TRANSDERMAL PATCH 24 HOUR 0.1 MG/HR, 0.2 MG/HR, 0.3 MG/HR, 0.4 MG/HR, 0.6 MG/HR, 0.8 MG/HR	4	ST
<i>nitroglycerin sublingual tablet 0.3 mg, 0.4 mg, 0.6 mg</i>	1	
<i>nitroglycerin transdermal patch 24 hour 0.1 mg/hr, 0.2 mg/hr, 0.4 mg/hr, 0.6 mg/hr</i>	1	
<i>nitroglycerin translingual spray, non-aerosol 400 mcg/spray</i>	1	
NITROLINGUAL TRANSLINGUAL SPRAY, NON-AEROSOL 400 MCG/SPRAY	EX	
NITROMIST TRANSLINGUAL AEROSOL, SPRAY 400 MCG/SPRAY	EX	
NITROSTAT SUBLINGUAL TABLET 0.3 MG, 0.4 MG, 0.6 MG	2	
<i>nitro-time oral capsule, extended release 2.5 mg, 6.5 mg, 9 mg</i>	1	

DERMATOLOGICALS/TOPICAL THERAPY

ANTIPSORIATIC / ANTISEBORRHEIC

<i>acitretin oral capsule 10 mg, 17.5 mg, 25 mg</i>	4	
ANALPRAM-HC TOPICAL LOTION 2.5-1 %	EX	
BIMZELX AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR 160 MG/ML, 320 MG/2 ML	4	PA; SP; LA
BIMZELX SUBCUTANEOUS SYRINGE 160 MG/ML, 320 MG/2 ML	4	PA; SP; LA
<i>calcipotriene scalp solution 0.005 %</i>	1	
<i>calcipotriene topical cream 0.005 %</i>	1	
CALCIPOTRIENE TOPICAL FOAM 0.005 %	EX	
<i>calcipotriene topical ointment 0.005 %</i>	1	

Drug Name	Tier	Requirements / Limits
<i>calcipotriene-betamethasone topical ointment 0.005-0.064 %</i>	4	
<i>calcipotriene-betamethasone topical suspension 0.005-0.064 %</i>	4	
<i>calcitriol topical ointment 3 mcg/gram</i>	1	
COSENTYX (2 SYRINGES) SUBCUTANEOUS SYRINGE 150 MG/ML	EX	
COSENTYX PEN (2 PENS) SUBCUTANEOUS NJECTOR 150 MG/ML	EX	
COSENTYX PEN SUBCUTANEOUS INJECTOR 150 MG/ML	EX	
COSENTYX SUBCUTANEOUS SYRINGE 150 MG/ML, 75 MG/0.5 ML	EX	
COSENTYX UNOREADY PEN SUBCUTANEOUS PEN INJECTOR 300 MG/2 ML	EX	
ENSTILAR TOPICAL FOAM 0.005-0.064 %	EX	
EPIFOAM TOPICAL FOAM 1-1 %	4	
<i>hydrocortisone-pramoxine topical cream 2.5-1 %</i>	4	
ILUMYA SUBCUTANEOUS SYRINGE 100 MG/ML	4	PA; SP; LA
OTULFI SUBCUTANEOUS SYRINGE 45 MG/0.5 ML, 90 MG/ML	EX	
OVACE PLUS TOPICAL SHAMPOO 10 %	EX	
OVACE PLUS TOPICAL CLEANSER 10 %	EX	
OVACE PLUS TOPICAL CREAM 10 %	EX	
OVACE PLUS TOPICAL LOTION 9.8 %	EX	
OVACE PLUS WASH TOPICAL CLEANSER, GEL 10 %	EX	
OVACE TOPICAL CLEANSER 10 %	EX	
PLEXION NS TOPICAL SHAMPOO 9.8 %	4	PA
PRAMOSONE TOPICAL CREAM 1-1 %	4	ST
PRAMOSONE TOPICAL LOTION 1-1 %, 2.5-1 %	4	ST
PRAMOSONE TOPICAL OINTMENT 1-1 %, 2.5-1 %	4	ST
PYZCHIVA SUBCUTANEOUS SYRINGE 45 MG/0.5 ML, 90 MG/ML	EX	

Drug Name	Tier	Requirements / Limits
SELARSDI SUBCUTANEOUS SYRINGE 45 MG/0.5 ML, 90 MG/ML	EX	
<i>selenium sulfide topical lotion 2.5 %</i>	1	
<i>selenium sulfide topical shampoo 2.25 %</i>	1	
<i>selenium sulfide topical shampoo 2.3 %</i>	EX	
SILIQ SUBCUTANEOUS SYRINGE 210 MG/1.5 ML	EX	
SKYRIZI SUBCUTANEOUS PEN INJECTOR 150 MG/ML	3	PA; SP; LA
SKYRIZI SUBCUTANEOUS SYRINGE 150 MG/ML	3	PA; SP; LA
SORILUX TOPICAL FOAM 0.005 %	EX	
SOTYKTU ORAL TABLET 6 MG	3	PA; SP; LA
SPEVIGO SUBCUTANEOUS SYRINGE 150 MG/ML	4	PA; SP; LA
STELARA SUBCUTANEOUS SOLUTION 45 MG/0.5 ML	3	PA; SP; LA
STELARA SUBCUTANEOUS SYRINGE 45 MG/0.5 ML, 90 MG/ML	3	PA; SP; LA
STEQEYMA SUBCUTANEOUS SYRINGE 45 MG/0.5 ML, 90 MG/ML	3	PA; SP; LA
<i>sulfacetamide sodium topical cleanser 10 %</i>	1	
<i>sulfacetamide sodium topical cleanser, gel 10 %</i>	1	
<i>sulfacetamide sodium topical shampoo 10 %</i>	1	
<i>sulfacetamide sodium topical shampoo 9.8 %</i>	4	
TACLONEX TOPICAL SUSPENSION 0.005-0.064 %	EX	
TALTZ AUTOINJECTOR (2 PACK) SUBCUTANEOUS AUTO-INJECTOR 80 MG/ML	3	PA; SP; LA
TALTZ AUTOINJECTOR (3 PACK) SUBCUTANEOUS AUTO-INJECTOR 80 MG/ML	3	PA; SP; LA
TALTZ AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR 80 MG/ML	3	PA; SP; LA
TALTZ SYRINGE SUBCUTANEOUS SYRINGE 20 MG/0.25 ML, 40 MG/0.5 ML, 80 MG/ML	3	PA; SP; LA
TERSI TOPICAL FOAM 2.25 %	4	PA

Drug Name	Tier	Requirements / Limits
TREMFYA PEN INDUCTION PK-CROHN SUBCUTANEOUS PEN INJECTOR 200 MG/2 ML	3	PA; SP
TREMFYA PEN SUBCUTANEOUS PEN INJECTOR 100 MG/ML, 200 MG/2 ML	3	PA; SP; LA
TREMFYA SUBCUTANEOUS AUTO-INJECTOR 100 MG/ML	3	PA; SP; LA
TREMFYA SUBCUTANEOUS SYRINGE 100 MG/ML, 200 MG/2 ML	3	PA; SP; LA
USTEKINUMAB SUBCUTANEOUS SOLUTION 45 MG/0.5 ML	EX	
USTEKINUMAB SUBCUTANEOUS SYRINGE 45 MG/0.5 ML, 90 MG/ML	EX	
USTEKINUMAB-AEKN SUBCUTANEOUS SYRINGE 45 MG/0.5 ML, 90 MG/ML	EX	
USTEKINUMAB-TTWE SUBCUTANEOUS SYRINGE 45 MG/0.5 ML, 90 MG/ML	EX	
VECTICAL TOPICAL OINTMENT 3 MCG/GRAM	EX	
VTAMA TOPICAL CREAM 1 %	4	PA
WEZLANA SUBCUTANEOUS SOLUTION 45 MG/0.5 ML	EX	
WEZLANA SUBCUTANEOUS SYRINGE 45 MG/0.5 ML, 90 MG/ML	EX	
WYNZORA TOPICAL CREAM 0.005-0.064 %	4	PA
YESINTEK SUBCUTANEOUS SOLUTION 45 MG/0.5 ML	3	PA; SP; LA
YESINTEK SUBCUTANEOUS SYRINGE 45 MG/0.5 ML, 90 MG/ML	3	PA; SP; LA
ZORYVE TOPICAL CREAM 0.15 %, 0.3 %	4	PA
ZORYVE TOPICAL FOAM 0.3 %	4	PA
BURN THERAPY		
SILVADENE TOPICAL CREAM 1 %	EX	
<i>silver sulfadiazine topical cream 1 %</i>	1	
<i>ssd topical cream 1 %</i>	1	
MISCELLANEOUS DERMATOLOGICALS		
ADBRY SUBCUTANEOUS AUTO-INJECTOR 300 MG/2 ML	3	PA; SP; LA

Drug Name	Tier	Requirements / Limits
ADBRY SUBCUTANEOUS SYRINGE 150 MG/ML	3	PA; SP; LA
<i>ammonium lactate topical cream 12 %</i>	1	
<i>ammonium lactate topical lotion 12 %</i>	1	
CARAC TOPICAL CREAM 0.5 %	EX	
CIBINQO ORAL TABLET 100 MG, 200 MG, 50 MG	4	PA; SP; LA
CONDYLOX TOPICAL GEL 0.5 %	EX	
CORTANE-B TOPICAL LOTION 1-1-0.1 %	EX	
<i>diclofenac sodium topical gel 3 %</i>	1	
<i>doxepin topical cream 5 %</i>	EX	
DRYSOL DAB-O-MATIC TOPICAL SOLUTION 20 %	2	
DUPIXENT SUBCUTANEOUS PEN INJECTOR 200 MG/1.14 ML, 300 MG/2 ML	3	PA; SP; LA
DUPIXENT SUBCUTANEOUS SYRINGE 200 MG/1.14 ML, 300 MG/2 ML	3	PA; SP; LA
EBGLYSS PEN SUBCUTANEOUS PEN INJECTOR 250 MG/2 ML	3	PA; SP; LA
EBGLYSS SYRINGE SUBCUTANEOUS SYRINGE 250 MG/2 ML	3	PA; SP; LA
EFUDEX TOPICAL CREAM 5 %	4	
ELIDEL TOPICAL CREAM 1 %	EX	
EUCRISA TOPICAL OINTMENT 2 %	4	PA
FLUOROURACIL TOPICAL CREAM 0.5 %	EX	
<i>fluorouracil topical cream 5 %</i>	4	
<i>fluorouracil topical solution 2 %, 5 %</i>	1	
HYFTOR TOPICAL GEL 0.2 %	4	PA; SP
<i>imiquimod topical cream in metered-dose pump 3.75 %</i>	EX	
<i>imiquimod topical cream in packet 3.75 %</i>	4	
<i>imiquimod topical cream in packet 5 %</i>	1	
IODOFLEX TOPICAL PADS, MEDICATED 0.9 %	4	
IODOSORB TOPICAL GEL 0.9 %	4	
<i>methoxsalen oral capsule, liqd-filled, rapid rel 10 mg</i>	1	
OPZELURA TOPICAL CREAM 1.5 %	4	PA

Drug Name	Tier	Requirements / Limits
PANRETIN TOPICAL GEL 0.1 %	4	
<i>pimecrolimus topical cream 1 %</i>	1	
<i>podofilox topical gel 0.5 %</i>	4	
<i>podofilox topical solution 0.5 %</i>	1	
<i>prudoxin topical cream 5 %</i>	4	
QBREXZA TOPICAL TOWELETTE 2.4 %	EX	
REGRANEX TOPICAL GEL 0.01 %	4	
SOFDRA TOPICAL GEL WITH PUMP 12.45 % (72 MG /ACTUATION)	4	PA; QL (1 per 30 days)
<i>tacrolimus topical ointment 0.03 %, 0.1 %</i>	1	
VALCHLOR TOPICAL GEL 0.016 %	4	PA; SP; LA
VEREGEN TOPICAL OINTMENT 15 %	EX	
ZONALON TOPICAL CREAM 5 %	EX	
ZYCLARA TOPICAL CREAM IN METERED- DOSE PUMP 2.5 %, 3.75 %	EX	
ZYCLARA TOPICAL CREAM IN PACKET 3.75 %	EX	
THERAPY FOR ACNE		
ABSORICA LD ORAL CAPSULE 16 MG, 24 MG, 32 MG, 8 MG	EX	
ABSORICA ORAL CAPSULE 10 MG, 20 MG, 25 MG, 30 MG, 35 MG, 40 MG	EX	
ACANYA TOPICAL GEL WITH PUMP 1.2-2.5 %	EX	
<i>acutane oral capsule 10 mg, 20 mg, 30 mg, 40 mg</i>	4	
ACZONE TOPICAL GEL 5 %	EX	
ACZONE TOPICAL GEL WITH PUMP 7.5 %	EX	
<i>adapalene topical cream 0.1 %</i>	EX	
<i>adapalene topical gel 0.3 %</i>	EX	
<i>adapalene topical gel with pump 0.3 %</i>	EX	
ADAPALENE TOPICAL LOTION 0.1 %	EX	
<i>adapalene topical solution 0.1 %</i>	EX	
<i>adapalene topical swab 0.1 %</i>	EX	
<i>adapalene-benzoyl peroxide topical gel with pump 0.1-2.5 %, 0.3-2.5 %</i>	EX	
AKLIEF TOPICAL CREAM 0.005 %	4	ST
ALTRENO TOPICAL LOTION 0.05 %	EX	

Drug Name	Tier	Requirements / Limits
<i>amnesteem oral capsule 10 mg, 20 mg, 30 mg, 40 mg</i>	1	
AMZEEQ TOPICAL FOAM 4 %	EX	
ARAZLO TOPICAL LOTION 0.045 %	EX	
ATRALIN TOPICAL GEL 0.05 %	EX	
AVAR LS TOPICAL CLEANSER 10-2 %	EX	
<i>avar topical cleanser 10-5 % (w/w)</i>	4	
AVAR-E TOPICAL CREAM 10-5 % (W/W)	EX	
<i>azelaic acid topical gel 15 %</i>	1	
AZELEX TOPICAL CREAM 20 %	EX	
BENZAMYCIN TOPICAL GEL 3-5 %	EX	
BENZEPRO (MICROSPHERES) TOPICAL CLEANSER 7 %	EX	
<i>benzebro topical towelette 6 %</i>	EX	
<i>benzoyl peroxide topical cleanser 7 %</i>	1	
<i>benzoyl peroxide topical foam 9.8 %</i>	EX	
<i>bp topical cleanser 10-1 %</i>	4	
<i>brimonidine topical gel with pump 0.33 %</i>	1	
CABTREO TOPICAL GEL 0.15-3.1-1.2 %	EX	
<i>claravis oral capsule 10 mg, 20 mg, 30 mg, 40 mg</i>	1	
CLENIA PLUS TOPICAL SUSPENSION 9-4.25 %	EX	
CLEOCIN T TOPICAL LOTION 1 %	EX	
CLINDACIN ETZ TOPICAL KIT 1 %	EX	
<i>clindacin etz topical swab 1 %</i>	EX	
<i>clindacin p topical swab 1 %</i>	EX	
CLINDACIN PAC TOPICAL KIT 1 %	EX	
<i>clindacin topical foam 1 %</i>	EX	
CLINDAGEL TOPICAL GEL, ONCE DAILY 1 %	EX	
<i>clindamycin phosphate topical foam 1 %</i>	EX	
<i>clindamycin phosphate topical gel 1 %</i>	1	
<i>clindamycin phosphate topical gel, once daily 1 %</i>	EX	
<i>clindamycin phosphate topical lotion 1 %</i>	1	
<i>clindamycin phosphate topical solution 1 %</i>	1	
<i>clindamycin phosphate topical swab 1 %</i>	1	

Drug Name	Tier	Requirements / Limits
<i>clindamycin-benzoyl peroxide topical gel 1-5 %, 1.2 %(1 % base) -5 %</i>	4	
<i>clindamycin-benzoyl peroxide topical gel with pump 1-5 %, 1.2 %(1 % base) -3.75 %, 1.2-2.5 %</i>	EX	
<i>clindamycin-tretinoin topical gel 1.2-0.025 %</i>	EX	
<i>dapsone topical gel 5 %</i>	4	
DAPSONE TOPICAL GEL 7.5 %	4	ST
<i>dapsone topical gel with pump 7.5 %</i>	4	
DIFFERIN TOPICAL CREAM 0.1 %	EX	
DIFFERIN TOPICAL GEL WITH PUMP 0.3 %	EX	
DIFFERIN TOPICAL LOTION 0.1 %	EX	
EPIDUO FORTE TOPICAL GEL WITH PUMP 0.3-2.5 %	EX	
EPSOLAY TOPICAL CREAM 5 %	4	PA
<i>ery pads topical swab 2 %</i>	1	
<i>erygel topical gel 2 %</i>	4	
<i>erythromycin with ethanol topical gel 2 %</i>	1	
<i>erythromycin with ethanol topical solution 2 %</i>	1	
<i>erythromycin-benzoyl peroxide topical gel 3-5 %</i>	1	
EVOCLIN TOPICAL FOAM 1 %	EX	
FABIOR TOPICAL FOAM 0.1 %	EX	
FINACEA TOPICAL FOAM 15 %	4	ST
<i>isotretinoin oral capsule 10 mg, 20 mg, 30 mg, 40 mg</i>	1	
<i>isotretinoin oral capsule 25 mg, 35 mg</i>	EX	
<i>ivermectin topical cream 1 %</i>	4	
METROCREAM TOPICAL CREAM 0.75 %	EX	
METROGEL TOPICAL GEL 1 %	EX	
<i>metronidazole topical cream 0.75 %</i>	1	
<i>metronidazole topical gel 0.75 %, 1 %</i>	1	
<i>metronidazole topical gel with pump 1 %</i>	EX	
<i>metronidazole topical lotion 0.75 %</i>	1	
MIRVASO TOPICAL GEL WITH PUMP 0.33 %	4	
NEUAC KIT TOPICAL COMBO PACK, CREAM AND GEL 1.2-5 %	EX	
<i>neuac topical gel 1.2 %(1 % base) -5 %</i>	EX	

Drug Name	Tier	Requirements / Limits
NORITATE TOPICAL CREAM 1 %	EX	
ONEXTON TOPICAL GEL WITH PUMP 1.2 % (1 % BASE) -3.75 %	EX	
PACNEX TOPICAL CLEANSER 7 %	EX	
PLEXION CLEANSING CLOTHS TOPICAL PADS, MEDICATED 9.8-4.8 %	EX	
PLEXION TOPICAL CLEANSER 9.8-4.8 %	EX	
PLEXION TOPICAL CREAM 9.8-4.8 %	EX	
PLEXION TOPICAL LOTION 9.8-4.8 %	EX	
PR BENZOYL PEROXIDE TOPICAL CLEANSER 7 %	EX	
RETIN-A MICRO TOPICAL GEL WITH PUMP 0.04 %, 0.06 %, 0.08 %, 0.1 %	EX	
RETIN-A MICRO TOPICAL GEL 0.04 %, 0.1 %	EX	
RETIN-A TOPICAL CREAM 0.025 %, 0.05 %	EX	
RETIN-A TOPICAL CREAM 0.1 %	4	ST
RETIN-A TOPICAL GEL 0.01 %, 0.025 %	EX	
RHOFADE TOPICAL CREAM 1 %	EX	
<i>rosadan topical cream 0.75 %</i>	1	
<i>rosadan topical gel 0.75 %</i>	1	
ROSDAN TOPICAL KIT, CLEANSER AND GEL 0.75 %	EX	
ROSDAN TOPICAL KIT, CLEANSER AND CREAM 0.75 %	EX	
<i>rosula cleansing cloths topical pads, medicated 10-5 %</i>	4	
ROSULA TOPICAL CLEANSER 10-4.5 %	EX	
SOOLANTRA TOPICAL CREAM 1 %	EX	
<i>sss 10-5 topical cream 10-5 % (w/w)</i>	1	
<i>sss 10-5 topical foam 10-5 %</i>	EX	
<i>sulfacetamide sodium-sulfur topical cleanser 10-2 %, 10-5 % (w/w), 9-4.5 %, 9.8-4.8 %</i>	4	
SULFACETAMIDE SODIUM-SULFUR TOPICAL CLEANSER 8-4 %	4	ST
<i>sulfacetamide sodium-sulfur topical cleanser 9-4 %</i>	EX	
<i>sulfacetamide sodium-sulfur topical cream 10-2 %, 10-5 % (w/w), 9.8-4.8 %</i>	4	

Drug Name	Tier	Requirements / Limits
<i>sulfacetamide sodium-sulfur topical lotion 10-5 % (w/v), 10-5 % (w/w), 9.8-4.8 %</i>	4	
<i>sulfacetamide sodium-sulfur topical pads, medicated 10-4 %</i>	4	
<i>sulfacetamide sodium-sulfur topical suspension 10-5 %</i>	4	
<i>sulfacetamide sodium-sulfur topical suspension 8-4 %</i>	1	
SULFACETAMIDE SODIUM-SULFUR TOPICAL SUSPENSION 9-4.25 %	EX	
<i>sulfacleanse 8-4 topical suspension 8-4 %</i>	4	
SUMADAN TOPICAL CLEANSER 9-4.5 %	EX	
SUMADAN TOPICAL KIT 9-4.5 %	EX	
SUMADAN XLT TOPICAL COMBO PACK, CLEANSER AND CREAM 9 %-4.5 % -SPF 25	4	ST
SUMAXIN CP TOPICAL KIT 10-4 %	EX	
SUMAXIN TOPICAL CLEANSER 9-4 %	EX	
SUMAXIN TOPICAL PADS, MEDICATED 10-4 %	EX	
SUMAXIN TS TOPICAL SUSPENSION 8-4 %	EX	
<i>tazarotene topical cream 0.05 %, 0.1 %</i>	4	
TAZAROTENE TOPICAL FOAM 0.1 %	EX	
<i>tazarotene topical gel 0.05 %, 0.1 %</i>	EX	
TAZORAC TOPICAL CREAM 0.05 %, 0.1 %	EX	
TAZORAC TOPICAL GEL 0.05 %, 0.1 %	EX	
<i>tretinoin microspheres topical gel 0.04 %, 0.1 %</i>	1	
<i>tretinoin microspheres topical gel with pump 0.04 %, 0.08 %, 0.1 %</i>	EX	
<i>tretinoin topical cream 0.025 %, 0.05 %, 0.1 %</i>	1	
<i>tretinoin topical gel 0.01 %, 0.025 %, 0.05 %</i>	1	
VANOXIDE-HC TOPICAL SUSPENSION 5-0.5 %	2	PA
VELTIN TOPICAL GEL 1.2-0.025 %	EX	
WINLEVI TOPICAL CREAM 1 %	4	ST
<i>zenatane oral capsule 10 mg, 20 mg, 30 mg, 40 mg</i>	1	
ZIANA TOPICAL GEL 1.2-0.025 %	EX	
ZILXI TOPICAL FOAM 1.5 %	EX	
ZMA CLEAR TOPICAL SUSPENSION 9-4.5 %	4	ST

Drug Name	Tier	Requirements / Limits
TOPICAL ANESTHETICS		
<i>dermacinrx lidocan topical adhesive patch, medicated 5 %</i>	1	
<i>lidocaine hcl laryngotracheal solution 4 %</i>	1	
<i>lidocaine hcl mucous membrane solution 4 % (40 mg/ml)</i>	1	
<i>lidocaine hcl-hydrocortison ac topical cream 3-0.5 %</i>	1	
<i>lidocaine topical adhesive patch, medicated 5 %</i>	1	
<i>lidocaine topical ointment 5 %</i>	1	
<i>lidocaine viscous mucous membrane solution 2 %</i>	1	
<i>lidocaine-prilocaine topical cream 2.5-2.5 %</i>	1	
<i>lidocaine-prilocaine topical kit 2.5-2.5 %</i>	EX	
LIDOCAINE-TETRACAINE TOPICAL CREAM 7-7 %	EX	
<i>lidocan iii topical adhesive patch, medicated 5 %</i>	EX	
<i>lidocan iv topical adhesive patch, medicated 5 %</i>	4	
<i>lidocan v topical adhesive patch, medicated 5 %</i>	4	
<i>lidocort topical cream 3-0.5 %</i>	4	
LIDODERM TOPICAL ADHESIVE PATCH, MEDICATED 5 %	EX	
PLIAGLIS TOPICAL CREAM 7-7 %	4	ST
ZTLIDO TOPICAL ADHESIVE PATCH, MEDICATED 1.8 %	EX	
TOPICAL ANTIBACTERIALS		
ALCORTIN A TOPICAL GEL 2-1-1 %	EX	
ALCORTIN A TOPICAL GEL IN PACKET 2-1-1 %	EX	
ALTABAX TOPICAL OINTMENT 1 %	4	
CENTANY AT TOPICAL OINTMENT KIT 2 %	EX	
CENTANY TOPICAL OINTMENT 2 %	EX	
<i>gentamicin topical cream 0.1 %</i>	1	
<i>gentamicin topical ointment 0.1 %</i>	1	
KLARON TOPICAL SUSPENSION 10 %	EX	
<i>lugols topical solution 5-10 %</i>	4	
<i>mafenide acetate topical packet 50 gram</i>	1	
<i>mupirocin calcium topical cream 2 %</i>	1	

Drug Name	Tier	Requirements / Limits
<i>mupirocin topical ointment 2 %</i>	1	
NEO-SYNALAR KIT TOPICAL CREAM 0.5 % (0.35 % BASE)-0.025 %	EX	
NEO-SYNALAR TOPICAL CREAM 0.5 % (0.35 % BASE)-0.025 %	EX	
<i>strong iodine topical solution 5-10 %</i>	4	
<i>sulfacetamide sodium (acne) topical suspension 10 %</i>	1	
SULFAMYLON TOPICAL CREAM 85 MG/G	4	
XEPI TOPICAL CREAM 1 %	4	PA
TOPICAL ANTIFUNGALS		
CICLODAN KIT TOPICAL COMBO PACK 0.77 %	EX	
CICLODAN KIT TOPICAL SOLUTION 8 %	EX	
<i>ciclodan topical cream 0.77 %</i>	4	
<i>ciclodan topical solution 8 %</i>	1	
<i>ciclopirox topical cream 0.77 %</i>	1	
<i>ciclopirox topical gel 0.77 %</i>	1	
<i>ciclopirox topical shampoo 1 %</i>	1	
<i>ciclopirox topical solution 8 %</i>	1	
<i>ciclopirox topical suspension 0.77 %</i>	1	
<i>ciclopirox-ure-camph-menth-euc topical solution 8 %</i>	4	
<i>clotrimazole topical cream 1 %</i>	1	
<i>clotrimazole topical solution 1 %</i>	1	
<i>clotrimazole-betamethasone topical cream 1-0.05 %</i>	1	
<i>clotrimazole-betamethasone topical lotion 1-0.05 %</i>	1	
<i>econazole nitrate topical cream 1 %</i>	1	
ECOZA TOPICAL FOAM 1 %	EX	
ERTACZO TOPICAL CREAM 2 %	EX	
EXELDERM TOPICAL CREAM 1 %	EX	
EXELDERM TOPICAL SOLUTION 1 %	EX	
EXTINA TOPICAL FOAM 2 %	EX	
JUBLIA TOPICAL SOLUTION WITH APPLICATOR 10 %	EX	

Drug Name	Tier	Requirements / Limits
<i>ketoconazole topical cream 2 %</i>	1	
<i>ketoconazole topical foam 2 %</i>	EX	
<i>ketoconazole topical shampoo 2 %</i>	1	
<i>ketodan kit topical combo pack 2 %</i>	EX	
<i>ketodan topical foam 2 %</i>	EX	
<i>klayesta topical powder 100,000 unit/gram</i>	1	
LOPROX (AS OLAMINE) TOPICAL CREAM 0.77 %	EX	
LOPROX (AS OLAMINE) TOPICAL SUSPENSION 0.77 %	EX	
LOPROX KIT TOPICAL COMBO PACK 0.77 %	EX	
LOPROX KIT TOPICAL KIT, SUSPENSION AND CLEANSER 0.77 %	EX	
LULICONAZOLE TOPICAL CREAM 1 %	EX	
LUZU TOPICAL CREAM 1 %	EX	
MICONAZOLE NITRATE-ZINC OX-PET TOPICAL OINTMENT 0.25-15-81.35 %	EX	
<i>naftifine topical cream 1 %</i>	4	
<i>naftifine topical cream 2 %</i>	1	
<i>naftifine topical gel 2 %</i>	4	
NAFTIN TOPICAL GEL 2 %	EX	
<i>nyamyc topical powder 100,000 unit/gram</i>	1	
<i>nystatin topical cream 100,000 unit/gram</i>	1	
<i>nystatin topical ointment 100,000 unit/gram</i>	1	
<i>nystatin topical powder 100,000 unit/gram</i>	1	
<i>nystatin-triamcinolone topical cream 100,000-0.1 unit/g-%</i>	1	
<i>nystatin-triamcinolone topical ointment 100,000-0.1 unit/gram-%</i>	1	
<i>nystop topical powder 100,000 unit/gram</i>	1	
<i>oxiconazole topical cream 1 %</i>	EX	
OXISTAT TOPICAL LOTION 1 %	EX	
SULCONAZOLE TOPICAL CREAM 1 %	EX	
SULCONAZOLE TOPICAL SOLUTION 1 %	EX	
<i>tavaborole topical solution with applicator 5 %</i>	EX	
VUSION TOPICAL OINTMENT 0.25-15-81.35 %	EX	

Drug Name	Tier	Requirements / Limits
TOPICAL ANTIVIRALS		
<i>acyclovir topical cream 5 %</i>	1	
<i>acyclovir topical ointment 5 %</i>	1	
DENAVIR TOPICAL CREAM 1 %	EX	
<i>penciclovir topical cream 1 %</i>	4	PA
XERESE TOPICAL CREAM 5-1 %	EX	
ZOVIRAX TOPICAL CREAM 5 %	EX	
ZOVIRAX TOPICAL OINTMENT 5 %	EX	
TOPICAL CORTICOSTEROIDS		
<i>ala-cort topical cream 1 %</i>	4	
ALA-SCALP TOPICAL LOTION 2 %	EX	
<i>alclometasone topical cream 0.05 %</i>	1	
<i>alclometasone topical ointment 0.05 %</i>	1	
<i>amcinonide topical cream 0.1 %</i>	4	
<i>amcinonide topical ointment 0.1 %</i>	4	
<i>apexicon e topical cream 0.05 %</i>	EX	
<i>beser topical lotion 0.05 %</i>	EX	
<i>betamethasone dipropionate topical cream 0.05 %</i>	1	
<i>betamethasone dipropionate topical lotion 0.05 %</i>	1	
<i>betamethasone dipropionate topical ointment 0.05 %</i>	1	
<i>betamethasone valerate topical cream 0.1 %</i>	1	
<i>betamethasone valerate topical foam 0.12 %</i>	EX	
<i>betamethasone valerate topical lotion 0.1 %</i>	1	
<i>betamethasone valerate topical ointment 0.1 %</i>	1	
<i>betamethasone, augmented topical cream 0.05 %</i>	1	
<i>betamethasone, augmented topical gel 0.05 %</i>	1	
<i>betamethasone, augmented topical lotion 0.05 %</i>	1	
<i>betamethasone, augmented topical ointment 0.05 %</i>	1	
BRYHALI TOPICAL LOTION 0.01 %	EX	
CAPEX TOPICAL SHAMPOO 0.01 %	EX	
<i>clobetasol scalp solution 0.05 %</i>	4	
CLOBETASOL TOPICAL CREAM 0.025 %	EX	
<i>clobetasol topical cream 0.05 %</i>	4	

Drug Name	Tier	Requirements / Limits
<i>clobetasol topical foam 0.05 %</i>	EX	
<i>clobetasol topical gel 0.05 %</i>	4	
<i>clobetasol topical lotion 0.05 %</i>	4	
<i>clobetasol topical ointment 0.05 %</i>	4	
<i>clobetasol topical shampoo 0.05 %</i>	4	
<i>clobetasol topical spray, non-aerosol 0.05 %</i>	4	
<i>clobetasol-emollient topical cream 0.05 %</i>	4	
<i>clobetasol-emollient topical foam 0.05 %</i>	EX	
CLOBEX TOPICAL SHAMPOO 0.05 %	EX	
CLOBEX TOPICAL SPRAY, NON-AEROSOL 0.05 %	EX	
<i>clocortolone pivalate topical cream 0.1 %</i>	EX	
CLODAN KIT TOPICAL KIT, SHAMPOO AND CLEANSER 0.05 %	EX	
<i>clodan topical shampoo 0.05 %</i>	EX	
CORDRAN LARGE ROLL TOPICAL TAPE 4 MCG/CM2	EX	
DERMA-SMOOTHIE/FS BODY TOPICAL OIL 0.01 %	4	
DERMA-SMOOTHIE/FS SCALP OIL 0.01 %	4	
<i>desonide topical cream 0.05 %</i>	4	
<i>desonide topical gel 0.05 %</i>	EX	
<i>desonide topical lotion 0.05 %</i>	4	
<i>desonide topical ointment 0.05 %</i>	4	
DESOWEN TOPICAL CREAM 0.05 %	EX	
<i>desoximetasone topical cream 0.05 %, 0.25 %</i>	4	
<i>desoximetasone topical gel 0.05 %</i>	4	
<i>desoximetasone topical ointment 0.05 %, 0.25 %</i>	4	
<i>desoximetasone topical spray, non-aerosol 0.25 %</i>	4	
<i>diflorasone topical cream 0.05 %</i>	EX	
<i>diflorasone topical ointment 0.05 %</i>	EX	
DIPROLENE (AUGMENTED) TOPICAL OINTMENT 0.05 %	EX	
DUOBRII TOPICAL LOTION 0.01-0.045 %	EX	
<i>fluocinolone and shower cap scalp oil 0.01 %</i>	1	
<i>fluocinolone topical cream 0.01 %, 0.025 %</i>	1	

Drug Name	Tier	Requirements / Limits
<i>fluocinolone topical oil 0.01 %</i>	1	
<i>fluocinolone topical ointment 0.025 %</i>	1	
<i>fluocinolone topical solution 0.01 %</i>	1	
<i>fluocinonide topical cream 0.05 %, 0.1 %</i>	4	
<i>fluocinonide topical gel 0.05 %</i>	4	
<i>fluocinonide topical ointment 0.05 %</i>	4	
<i>fluocinonide topical solution 0.05 %</i>	4	
<i>fluocinonide-e topical cream 0.05 %</i>	4	
<i>flurandrenolide topical cream 0.05 %</i>	EX	
<i>flurandrenolide topical lotion 0.05 %</i>	EX	
<i>flurandrenolide topical ointment 0.05 %</i>	EX	
<i>fluticasone propionate topical cream 0.05 %</i>	1	
<i>fluticasone propionate topical lotion 0.05 %</i>	EX	
<i>fluticasone propionate topical ointment 0.005 %</i>	1	
<i>halcinonide topical cream 0.1 %</i>	EX	
<i>halcinonide topical solution 0.1 %</i>	EX	
<i>halobetasol propionate topical cream 0.05 %</i>	1	
<i>halobetasol propionate topical foam 0.05 %</i>	EX	
<i>halobetasol propionate topical ointment 0.05 %</i>	1	
HALOG TOPICAL CREAM 0.1 %	EX	
HALOG TOPICAL OINTMENT 0.1 %	EX	
<i>hydrocortisone butyrate topical cream 0.1 %</i>	4	
<i>hydrocortisone butyrate topical lotion 0.1 %</i>	EX	
<i>hydrocortisone butyrate topical ointment 0.1 %</i>	4	
<i>hydrocortisone butyrate topical solution 0.1 %</i>	4	
<i>hydrocortisone topical cream 1 %, 2.5 %</i>	1	
<i>hydrocortisone topical lotion 2 %, 2.5 %</i>	EX	
<i>hydrocortisone topical ointment 1 %, 2.5 %</i>	1	
<i>hydrocortisone topical solution 2.5 %</i>	EX	
<i>hydrocortisone valerate topical cream 0.2 %</i>	1	
<i>hydrocortisone valerate topical ointment 0.2 %</i>	1	
IMPOYZ TOPICAL CREAM 0.025 %	EX	
KENALOG TOPICAL AEROSOL 0.147 MG/GRAM	EX	
<i>mometasone topical cream 0.1 %</i>	1	

Drug Name	Tier	Requirements / Limits
<i>mometasone topical ointment 0.1 %</i>	1	
<i>mometasone topical solution 0.1 %</i>	1	
NUCORT TOPICAL LOTION 2 %	4	ST
OLUX TOPICAL FOAM 0.05 %	EX	
PANDEL TOPICAL CREAM 0.1 %	EX	
<i>prednicarbate topical cream 0.1 %</i>	4	
<i>prednicarbate topical ointment 0.1 %</i>	4	
PROCTOCORT TOPICAL CREAM 1 %	EX	
<i>scalacort topical lotion 2 %</i>	EX	
SERNIVO TOPICAL SPRAY WITH PUMP 0.05 %	EX	
SYNALAR CREAM KIT TOPICAL CREAM 0.025 %	EX	
SYNALAR OINTMENT KIT TOPICAL COMBO PACK, OINTMENT AND CREAM 0.025 %	EX	
SYNALAR TOPICAL CREAM 0.025 %	EX	
SYNALAR TOPICAL OINTMENT 0.025 %	EX	
SYNALAR TOPICAL SOLUTION 0.01 %	EX	
SYNALAR TS TOPICAL KIT 0.01 %	EX	
TEXACORT TOPICAL SOLUTION 2.5 %	EX	
TOPICORT TOPICAL CREAM 0.05 %, 0.25 %	EX	
TOPICORT TOPICAL GEL 0.05 %	EX	
TOPICORT TOPICAL OINTMENT 0.05 %, 0.25 %	EX	
TOPICORT TOPICAL SPRAY, NON-AEROSOL 0.25 %	EX	
<i>tovet emollient topical foam 0.05 %</i>	EX	
<i>triamcinolone acetonide topical aerosol 0.147 mg/gram</i>	EX	
<i>triamcinolone acetonide topical cream 0.025 %, 0.1 %, 0.5 %</i>	1	
<i>triamcinolone acetonide topical lotion 0.025 %, 0.1 %</i>	1	
<i>triamcinolone acetonide topical ointment 0.025 %, 0.05 %, 0.1 %, 0.5 %</i>	1	
<i>triderm topical cream 0.5 %</i>	EX	
ULTRAVATE TOPICAL LOTION 0.05 %	EX	
VANOS TOPICAL CREAM 0.1 %	EX	

Drug Name	Tier	Requirements / Limits
VERDESO TOPICAL FOAM 0.05 %	EX	
TOPICAL ENZYMES		
NEXOBRID TOPICAL GEL 8.8 %	4	PA
SANTYL TOPICAL OINTMENT 250 UNIT/GRAM	2	QL (6 per 30 days)
TOPICAL SCABICIDES / PEDICULICIDES		
<i>crotan topical lotion 10 %</i>	4	
ELIMITE TOPICAL CREAM 5 %	4	
EURAX TOPICAL CREAM 10 %	4	
EURAX TOPICAL LOTION 10 %	4	
<i>malathion topical lotion 0.5 %</i>	4	
NATROBA TOPICAL SUSPENSION 0.9 %	EX	
OVIDE TOPICAL LOTION 0.5 %	EX	
<i>permethrin topical cream 5 %</i>	1	
<i>pruradik topical lotion 10 %</i>	EX	
<i>spinosad topical suspension 0.9 %</i>	1	
ULESFIA TOPICAL LOTION 5 %	4	
DIAGNOSTICS & MISCELLANEOUS AGENTS		
ANOREXIANTS		
IMCIVREE SUBCUTANEOUS SOLUTION 10 MG/ML	4	PA; SP
IRRIGATING SOLUTIONS		
<i>lactated ringers irrigation solution</i>	4	
<i>neomycin-polymyxin b gu irrigation solution 40 mg-200,000 unit/ml</i>	4	
PHYSIOLYTE IRRIGATION SOLUTION 140-5-3-98 MEQ/L	EX	
PHYSIOSOL IRRIGATION SOLUTION 140-5-3-98 MEQ/L	EX	
<i>ringer's irrigation solution</i>	4	
SORBITOL IRRIGATION SOLUTION 3 %	4	
SORBITOL-MANNITOL TRANSURETHRAL SOLUTION 2.7-0.54 GRAM/100 ML	4	
MISCELLANEOUS AGENTS		
<i>acamprosate oral tablet, delayed release (dr/ec) 333 mg</i>	1	

Drug Name	Tier	Requirements / Limits
<i>acetic acid irrigation solution 0.25 %</i>	4	
AGRYLIN ORAL CAPSULE 0.5 MG	4	
<i>anagrelide oral capsule 0.5 mg, 1 mg</i>	1	
BUPHENYL ORAL POWDER 0.94 GRAM/GRAM	4	PA; SP
BUPHENYL ORAL TABLET 500 MG	4	PA; SP
<i>caffeine citrate oral solution 60 mg/3 ml (20 mg/ml)</i>	1	
CARBAGLU ORAL TABLET, DISPERSIBLE 200 MG	EX	
<i>carglumic acid oral tablet, dispersible 200 mg</i>	4	PA; SP
CARNITOR (SUGAR-FREE) ORAL SOLUTION 100 MG/ML	4	
CARNITOR ORAL SOLUTION 100 MG/ML	4	
CARNITOR ORAL TABLET 330 MG	4	
<i>cevimeline oral capsule 30 mg</i>	1	
CHEMET ORAL CAPSULE 100 MG	4	PA
CUVRIOR ORAL TABLET 300 MG	4	PA; SP
<i>deferasirox oral granules in packet 180 mg, 360 mg, 90 mg</i>	3	PA; SP; LA
<i>deferasirox oral tablet 180 mg, 360 mg, 90 mg</i>	3	PA; SP; LA
<i>deferasirox oral tablet, dispersible 125 mg, 250 mg, 500 mg</i>	3	PA; SP; LA
<i>deferiprone oral tablet 1,000 mg, 500 mg</i>	4	PA; SP; LA
<i>disulfiram oral tablet 250 mg, 500 mg</i>	1	
<i>droxidopa oral capsule 100 mg, 200 mg, 300 mg</i>	4	PA; SP; LA
DUVYZAT ORAL SUSPENSION 8.86 MG/ML	4	PA; SP
EMPAVELI SUBCUTANEOUS SOLUTION 1,080 MG/20 ML	3	PA; SP
ENDARI ORAL POWDER IN PACKET 5 GRAM	4	PA; SP; LA; QL (180 per 30 days)
EVOXAC ORAL CAPSULE 30 MG	4	
EXJADE ORAL TABLET, DISPERSIBLE 125 MG, 250 MG, 500 MG	EX	
FABHALTA ORAL CAPSULE 200 MG	4	PA; SP
FERRIPROX (2 TIMES A DAY) ORAL TABLET, MODIFIED RELEASE 1,000 MG	4	PA; SP
FERRIPROX ORAL SOLUTION 100 MG/ML	4	PA; SP

Drug Name	Tier	Requirements / Limits
FERRIPROX ORAL TABLET 1,000 MG, 500 MG	EX	
<i>glutamine (sickle cell) oral powder in packet 5 gram</i>	4	PA; SP; LA; QL (180 per 30 days)
INCRELEX SUBCUTANEOUS SOLUTION 10 MG/ML	4	PA; SP
JADENU ORAL TABLET 180 MG, 360 MG, 90 MG	EX	
JADENU SPRINKLE ORAL GRANULES IN PACKET 180 MG, 360 MG, 90 MG	EX	
JOENJA ORAL TABLET 70 MG	4	PA; SP; QL (60 per 30 days)
<i>levocarnitine (with sugar) oral solution 100 mg/ml</i>	1	
<i>levocarnitine oral solution 100 mg/ml</i>	1	
<i>levocarnitine oral tablet 330 mg</i>	1	
LITHOSTAT ORAL TABLET 250 MG	4	PA; QL (180 per 30 days)
METOPIRONE ORAL CAPSULE 250 MG	4	
<i>midodrine oral tablet 10 mg, 2.5 mg, 5 mg</i>	1	
<i>nitisinone oral capsule 10 mg, 2 mg, 20 mg, 5 mg</i>	4	PA; SP; LA
NITYR ORAL TABLET 10 MG, 2 MG, 5 MG	3	PA; SP; LA
NORTHERA ORAL CAPSULE 100 MG, 200 MG, 300 MG	EX	
OLPRUVA ORAL PELLETS IN PACKET 2 GRAM, 3 GRAM, 4 GRAM, 5 GRAM, 6 GRAM, 6.67 GRAM	4	PA; SP
ORFADIN ORAL CAPSULE 10 MG, 2 MG, 20 MG, 5 MG	EX	
ORFADIN ORAL SUSPENSION 4 MG/ML	4	PA; SP
PHEBURANE ORAL GRANULES 483 MG/GRAM	4	PA; SP; LA
PYRUKYND ORAL TABLET 20 MG, 5 MG, 50 MG	4	PA; SP
PYRUKYND ORAL TABLETS, DOSE PACK 20 MG (7)- 5 MG (7), 50 MG (7)- 20 MG (7)	4	PA; SP
RADIOGARDASE ORAL CAPSULE 0.5 GRAM	4	
RAVICTI ORAL LIQUID 1.1 GRAM/ML	4	PA; SP; LA
REZDIFFRA ORAL TABLET 100 MG, 60 MG, 80 MG	4	PA; SP; LA; QL (30 per 30 days)
RILUTEK ORAL TABLET 50 MG	4	
<i>riluzole oral tablet 50 mg</i>	1	

Drug Name	Tier	Requirements / Limits
<i>risedronate oral tablet 30 mg</i>	1	
<i>sodium chlor 0.9% bacteriostat injection solution 0.9 %</i>	1	
<i>sodium chloride 0.9 % injection solution</i>	4	
<i>sodium chloride injection syringe 0.9 %</i>	1	
<i>sodium chloride irrigation solution 0.9 %</i>	1	
<i>sodium phenylbutyrate oral powder 0.94 gram/gram</i>	4	PA
<i>sodium phenylbutyrate oral tablet 500 mg</i>	4	PA
SOHONOS ORAL CAPSULE 1 MG, 1.5 MG, 10 MG, 2.5 MG, 5 MG	4	PA; SP
SYPRINE ORAL CAPSULE 250 MG	4	PA; QL (240 per 30 days)
TAVNEOS ORAL CAPSULE 10 MG	4	PA; SP
TEGLUTIK ORAL SUSPENSION 50 MG/10 ML	4	PA; SP
THIOLA EC ORAL TABLET, DELAYED RELEASE (DR/EC) 100 MG, 300 MG	4	PA; SP
THIOLA ORAL TABLET 100 MG	EX	
TIGLUTIK ORAL SUSPENSION 50 MG/10 ML	4	PA; SP
<i>tiopronin oral tablet 100 mg</i>	4	PA; SP; LA
<i>tiopronin oral tablet, delayed release (dr/ec) 100 mg, 300 mg</i>	4	PA; SP
<i>trientine oral capsule 250 mg</i>	4	PA; QL (240 per 30 days)
TRIENTINE ORAL CAPSULE 500 MG	4	PA; QL (90 per 30 days)
VAFSEO ORAL TABLET 150 MG, 300 MG	4	PA; QL (30 per 30 days)
<i>venxxiva oral tablet, delayed release (dr/ec) 100 mg, 300 mg</i>	4	PA; SP
VOYDEYA ORAL TABLET 100 MG, 150 MG (50 MG X 1-100 MG X 1)	4	PA; SP; QL (120 per 30 days)
VYKAT XR ORAL TABLET EXTENDED RELEASE 24 HR 150 MG, 25 MG, 75 MG	4	PA; SP
<i>water for irrigation, sterile irrigation solution</i>	1	
XURIDEN ORAL GRANULES IN PACKET 2 GRAM	4	PA; SP; QL (120 per 30 days)
ZOKINVY ORAL CAPSULE 50 MG, 75 MG	3	PA; SP
SMOKING DETERRENENTS		
<i>bupropion hcl (smoking deter) oral tablet extended release 12 hr 150 mg</i>	1	ACA PV

Drug Name	Tier	Requirements / Limits
CHANTIX CONTINUING MONTH BOX ORAL TABLET 1 MG	4	
CHANTIX ORAL TABLET 0.5 MG, 1 MG	4	
CHANTIX STARTING MONTH BOX ORAL TABLETS, DOSE PACK 0.5 MG (11)- 1 MG (42)	4	
<i>nicotine (polacrilex) buccal gum 2 mg, 4 mg</i>	1	ACA PV
<i>nicotine (polacrilex) buccal lozenge 2 mg, 4 mg</i>	1	ACA PV
<i>nicotine (polacrilex) buccal mini lozenge 2 mg, 4 mg</i>	1	ACA PV
<i>nicotine transdermal patch 24 hour 14 mg/24 hr, 21 mg/24 hr, 7 mg/24 hr</i>	4	ACA PV
<i>nicotine transdermal patch, td daily, sequential 21-14-7 mg/24 hr</i>	4	ACA PV
NICOTROL NS NASAL SPRAY, NON-AEROSOL 10 MG/ML	2	ACA PV
<i>quit 2 buccal gum 2 mg</i>	4	ACA PV
<i>quit 2 buccal lozenge 2 mg</i>	1	ACA PV
<i>quit 4 buccal gum 4 mg</i>	4	ACA PV
<i>quit 4 buccal lozenge 4 mg</i>	1	ACA PV
<i>stop smoking aid buccal lozenge 2 mg, 4 mg</i>	4	ACA PV
<i>varenicline tartrate oral tablet 0.5 mg, 1 mg</i>	1	ACA PV
<i>varenicline tartrate oral tablets, dose pack 0.5 mg (11)- 1 mg (42)</i>	1	ACA PV

EAR, NOSE & THROAT MEDICATIONS

MISCELLANEOUS AGENTS

<i>azelastine nasal spray, non-aerosol 137 mcg (0.1 %), 205.5 mcg (0.15 %)</i>	1	
<i>chlorhexidine gluconate mucous membrane mouthwash 0.12 %</i>	1	
CLINPRO 5000 DENTAL PASTE 1.1 %	2	
<i>denta 5000 plus dental cream 1.1 %</i>	1	
<i>denta 5000 plus sensitive dental paste 1.1-5 %</i>	4	
<i>dentagel dental gel 1.1 %</i>	1	
<i>fluoride (sodium) dental cream 1.1 %</i>	4	
<i>fluoride (sodium) dental gel 1.1 %</i>	1	
<i>fluoride (sodium) dental paste 1.1 %</i>	4	
<i>fluoride (sodium) dental solution 0.2 %</i>	1	

Drug Name	Tier	Requirements / Limits
FLUORIDEX DAILY DEFENSE DENTAL PASTE 1.1 %	4	
FLUORIDEX SENSITIVITY RELIEF DENTAL PASTE 1.1-5 %	4	
FLUORIMAX 5000 DENTAL PASTE 1.1 %	4	
FLUORIMAX 5000 SENSITIVE DENTAL PASTE 1.1-5 %	4	
<i>fraiche 5000 dental gel 1.1 %</i>	EX	
GELCLAIR MUCOUS MEMBRANE GEL IN PACKET	4	
<i>ipratropium bromide nasal spray, non-aerosol 21 mcg (0.03 %), 42 mcg (0.06 %)</i>	1	
JUST RIGHT 5000 DENTAL PASTE 1.1 %	4	
<i>kourzeq dental paste 0.1 %</i>	1	
MUGARD MUCOUS MEMBRANE SOLUTION	4	SP
<i>olopatadine nasal spray, non-aerosol 0.6 %</i>	4	
<i>oralone dental paste 0.1 %</i>	1	
ORAMAGICRX MUCOUS MEMBRANE MOUTHWASH	4	
<i>paroex oral rinse mucous membrane mouthwash 0.12 %</i>	1	
PERIDEX MUCOUS MEMBRANE MOUTHWASH 0.12 %	4	
<i>periogard mucous membrane mouthwash 0.12 %</i>	1	
<i>pilocarpine hcl oral tablet 5 mg, 7.5 mg</i>	1	
PREVIDENT 5000 BOOSTER PLUS DENTAL PASTE 1.1 %	4	
PREVIDENT 5000 ENAMEL PROTECT DENTAL PASTE 1.1-5 %	4	
PREVIDENT 5000 ORTHO DEFENSE DENTAL PASTE 1.1 %	4	
PREVIDENT 5000 PLUS DENTAL CREAM 1.1 %	4	
PREVIDENT 5000 SENSITIVE DENTAL PASTE 1.1-5 %	4	
PREVIDENT DENTAL GEL 1.1 %	4	
PREVIDENT DENTAL SOLUTION 0.2 %	4	
PREVIDENT KIDS DENTAL PASTE 1.1 %	4	

Drug Name	Tier	Requirements / Limits
PROTHELIAL MUCOUS MEMBRANE PASTE 1 GRAM/10 ML	4	SP
SALAGEN (PILOCARPINE) ORAL TABLET 5 MG, 7.5 MG	4	
<i>sf 5000 plus dental cream 1.1 %</i>	1	
<i>sf dental gel 1.1 %</i>	1	
<i>sodium fluoride 5000 plus dental cream 1.1 %</i>	1	
<i>sodium fluoride-pot nitrate dental paste 1.1-5 %</i>	4	
<i>triamcinolone acetonide dental paste 0.1 %</i>	1	
MISCELLANEOUS OTIC PREPARATIONS		
<i>acetic acid otic (ear) solution 2 %</i>	1	
CETRAXAL OTIC (EAR) DROPPERETTE 0.2 %	EX	
<i>ciprofloxacin hcl otic (ear) dropperette 0.2 %</i>	1	
DERMOTIC OIL OTIC (EAR) DROPS 0.01 %	4	
<i>flac oil otic (ear) drops 0.01 %</i>	4	
<i>fluocinolone acetonide oil otic (ear) drops 0.01 %</i>	1	
<i>hydrocortisone-acetic acid otic (ear) drops 1-2 %</i>	1	
<i>ofloxacin otic (ear) drops 0.3 %</i>	1	
OTIC STEROID / ANTIBIOTIC		
CIPRO HC OTIC (EAR) DROPS, SUSPENSION 0.2-1 %	EX	
<i>ciprofloxacin-dexamethasone otic (ear) drops, suspension 0.3-0.1 %</i>	4	
CIPROFLOXACIN-FLUOCINOLONE OTIC (EAR) SOLUTION 0.3-0.025 % (0.25 ML)	EX	
CORTISPORIN-TC OTIC (EAR) DROPS, SUSPENSION 3.3-3-10-0.5 MG/ML	4	
<i>neomycin-polymyxin-hc otic (ear) drops, suspension 3.5-10,000-1 mg/ml-unit/ml-%</i>	1	
<i>neomycin-polymyxin-hc otic (ear) solution 3.5- 10,000-1 mg/ml-unit/ml-%</i>	1	
OTOVEL OTIC (EAR) SOLUTION 0.3-0.025 % (0.25 ML)	EX	
ENDOCRINE/DIABETES		
ADRENAL HORMONES		
ACTHAR INJECTION GEL 80 UNIT/ML	4	PA; SP; LA

Drug Name	Tier	Requirements / Limits
ACTHAR SELFJECT SUBCUTANEOUS PEN INJECTOR 40 UNIT/0.5 ML, 80 UNIT/ML	4	PA; SP; LA
AGAMREE ORAL SUSPENSION 40 MG/ML	4	PA; SP
ALKINDI ORAL CAPSULE, SPRINKLE 0.5 MG, 1 MG, 2 MG, 5 MG	EX	
<i>betamethasone acet, sod phos injection suspension 6 mg/ml</i>	4	
CORTEF ORAL TABLET 10 MG, 20 MG, 5 MG	4	ST
<i>cortisone oral tablet 25 mg</i>	1	
CORTROPHIN GEL INJECTION 80 UNIT/ML	4	PA; SP; LA
CORTROPHIN GEL SUBCUTANEOUS SYRINGE 40 UNIT/0.5 ML, 80 UNIT/ML	4	PA; SP; LA
<i>deflazacort oral suspension 22.75 mg/ml</i>	EX	
<i>deflazacort oral tablet 18 mg, 30 mg, 36 mg, 6 mg</i>	EX	
<i>dexabliss oral tablets, dose pack 1.5 mg (39 tabs)</i>	EX	
<i>dexamethasone intensol oral drops 1 mg/ml</i>	1	
<i>dexamethasone oral elixir 0.5 mg/5 ml</i>	1	
<i>dexamethasone oral solution 0.5 mg/5 ml</i>	1	
<i>dexamethasone oral tablet 0.5 mg, 0.75 mg, 1 mg, 1.5 mg, 2 mg, 4 mg, 6 mg</i>	1	
<i>dexamethasone oral tablets, dose pack 1.5 mg (21 tabs), 1.5 mg (35 tabs)</i>	4	
<i>dexamethasone sodium phos (pf) injection solution 10 mg/ml</i>	1	
<i>dexamethasone sodium phosphate injection solution 10 mg/ml, 4 mg/ml</i>	1	
<i>dexamethasone sodium phosphate injection syringe 4 mg/ml</i>	EX	
EMFLAZA ORAL SUSPENSION 22.75 MG/ML	EX	
EMFLAZA ORAL TABLET 18 MG, 30 MG, 36 MG, 6 MG	EX	
<i>fludrocortisone oral tablet 0.1 mg</i>	1	
HEMADY ORAL TABLET 20 MG	4	ST
<i>hydrocortisone oral tablet 10 mg, 20 mg, 5 mg</i>	1	
KENALOG INJECTION SUSPENSION 10 MG/ML, 40 MG/ML	4	
KHINDIVI ORAL SOLUTION 1 MG/ML	EX	

Drug Name	Tier	Requirements / Limits
MEDROL (PAK) ORAL TABLETS, DOSE PACK 4 MG	4	ST
MEDROL ORAL TABLET 16 MG, 2 MG, 4 MG, 8 MG	4	ST
<i>methylprednisolone acetate injection suspension 40 mg/ml, 80 mg/ml</i>	1	
<i>methylprednisolone oral tablet 16 mg, 32 mg, 4 mg, 8 mg</i>	1	
<i>methylprednisolone oral tablets, dose pack 4 mg</i>	1	
<i>millipred dp oral tablets, dose pack 5 mg (21 tabs), 5 mg (48 tabs)</i>	1	
<i>millipred oral tablet 5 mg</i>	1	
ORAPRED ODT ORAL TABLET, DISINTEGRATING 10 MG, 15 MG, 30 MG	4	ST
<i>prednisolone oral solution 15 mg/5 ml</i>	1	
<i>prednisolone oral tablet 5 mg</i>	1	
<i>prednisolone sodium phosphate oral solution 10 mg/5 ml, 15 mg/5 ml (3 mg/ml), 20 mg/5 ml (4 mg/ml), 25 mg/5 ml (5 mg/ml), 5 mg base/5 ml (6.7 mg/5 ml)</i>	1	
<i>prednisolone sodium phosphate oral tablet, disintegrating 10 mg, 15 mg, 30 mg</i>	1	
<i>prednisone intensol oral concentrate 5 mg/ml</i>	1	
<i>prednisone oral solution 5 mg/5 ml</i>	1	
<i>prednisone oral tablet 1 mg, 10 mg, 2.5 mg, 20 mg, 5 mg, 50 mg</i>	1	
<i>prednisone oral tablets, dose pack 10 mg, 5 mg</i>	1	
RAYOS ORAL TABLET, DELAYED RELEASE (DR/EC) 1 MG, 2 MG, 5 MG	EX	
TAPERDEX ORAL TABLETS, DOSE PACK 1.5 MG (21 TABS), 1.5 MG (27 TABS), 1.5 MG (49 TABS)	EX	
TARPEYO ORAL CAPSULE, DELAYED RELEASE(DR/EC) 4 MG	4	PA; SP
<i>triamcinolone acetonide injection suspension 40 mg/ml</i>	4	
ZCORT ORAL TABLETS, DOSE PACK 1.5 MG (25 TABS)	4	ST
ANTITHYROID AGENTS		
<i>methimazole oral tablet 10 mg, 5 mg</i>	1	

Drug Name	Tier	Requirements / Limits
<i>potassium iodide oral solution 1 gram/ml</i>	4	
<i>propylthiouracil oral tablet 50 mg</i>	1	
SSKI ORAL SOLUTION 1 GRAM/ML	2	
BLOOD GLUCOSE MONITORING DEVICES & SUPPLIES		
ACCU-CHEK AVIVA PLUS TEST STRIP	4	ST
ACCU-CHEK GUIDE TEST STRIP	4	ST
ACCU-CHEK SMARTVIEW TEST STRIP	4	ST
ACCUTREND GLUCOSE TEST STRIP	4	ST
CONTOUR NEXT TEST STRIP	2	
CONTOUR PLUS TEST STRIP	2	
CONTOUR TEST STRIP	2	
DEXCOM G6 SENSOR DEVICE	4	
DEXCOM G6 TRANSMITTER DEVICE	4	
DEXCOM G7 SENSOR DEVICE	4	
EVERSENSE 365 TRANSMITTER DEVICE	4	
FREESTYLE INSULINX STRIP	4	ST
FREESTYLE INSULINX TEST STRIP	4	ST
FREESTYLE LIBRE 14 DAY SENSOR KIT	4	
FREESTYLE LIBRE 2 PLUS SENSOR DEVICE	4	
FREESTYLE LIBRE 2 SENSOR KIT	4	
FREESTYLE LIBRE 3 PLUS SENSOR DEVICE	4	
FREESTYLE LIBRE 3 SENSOR DEVICE	4	
FREESTYLE LITE STRIP	4	ST
FREESTYLE TEST STRIP	4	ST
GLUCOCARD SHINE TEST STRIP	4	ST
GLUCOCARD VITAL SENSOR STRIP	4	ST
GUARDIAN 4 GLUCOSE SENSOR DEVICE	4	
GUARDIAN 4 TRANSMITTER DEVICE	4	
GUARDIAN LINK 3 TRANSMITTER DEVICE	4	
GUARDIAN SENSOR 3 DEVICE	4	
ONETOUCH ULTRA TEST STRIP	2	
ONETOUCH VERIO TEST STRIP	2	
OPTIUM EZ STRIP	4	ST
OPTIUM TEST STRIP	4	ST
PRECISION PCX PLUS TEST STRIP	4	ST

Drug Name	Tier	Requirements / Limits
PRECISION PCX TEST STRIP	4	ST
PRECISION POINT OF CARE TEST STRIP	4	ST
PRECISION Q-I-D TEST STRIP	4	ST
PRECISION XTRA TEST STRIP	4	ST
SIMPLERA SENSOR DEVICE	4	
SIMPLERA SYNC SENSOR DEVICE	4	
TRUETRACK TEST STRIP	4	ST
DIABETES, SUPPLIES, & DURABLE MEDICAL EQUIPMENT		
INSULIN SYRINGE-NEEDLE U-100 SYRINGE 0.5 ML 29 GAUGE X 1/2"	2	
OMNIPOD 5 INTRO(G6/LIBRE2PLUS) SUBCUTANEOUS CARTRIDGE	4	
GLUCOSE ELEVATING AGENTS		
BAQSIMI NASAL SPRAY, NON-AEROSOL 3 MG/ACTUATION	2	
<i>diazoxide oral suspension 50 mg/ml</i>	1	
GLUCAGON (HCL) EMERGENCY KIT INJECTION RECON SOLN 1 MG	2	
<i>glucagon emergency kit (human) injection recon soln 1 mg</i>	1	
GVOKE HYPOPEN 2-PACK SUBCUTANEOUS AUTO-INJECTOR 0.5 MG/0.1 ML, 1 MG/0.2 ML	4	
GVOKE PFS 2-PACK SYRINGE SUBCUTANEOUS SYRINGE 1 MG/0.2 ML	4	
GVOKE SUBCUTANEOUS SOLUTION 1 MG/0.2 ML	4	
PROGLYCEM ORAL SUSPENSION 50 MG/ML	4	
INSULIN SYRINGES/MISCELLANEOUS DURABLE MEDICAL EQU		
BD INTEGRA NEEDLE 23 GAUGE X 1"	2	
BD MICROTAINER LANCET 30 GAUGE	2	
BD SPECIALTY USE NEEDLES NEEDLE 30 GAUGE X 1/2"	2	
LANCETS 33 GAUGE	2	
OMNIPOD 5 (G6/LIBRE 2 PLUS) SUBCUTANEOUS CARTRIDGE	4	
OMNIPOD 5 G6-G7 INTRO KT(GEN5) SUBCUTANEOUS CARTRIDGE	4	

Drug Name	Tier	Requirements / Limits
OMNIPOD 5 G6-G7 PODS (GEN 5) SUBCUTANEOUS CARTRIDGE	4	
OMNIPOD DASH INTRO KIT (GEN 4) SUBCUTANEOUS CARTRIDGE	4	
OMNIPOD DASH PODS (GEN 4) SUBCUTANEOUS CARTRIDGE	4	
PEN NEEDLE, DIABETIC NEEDLE 29 GAUGE X 1/2"	2	
INSULIN THERAPY		
ADMELOG SOLOSTAR U-100 INSULIN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML	EX	
ADMELOG U-100 INSULIN LISPRO SUBCUTANEOUS SOLUTION 100 UNIT/ML	EX	
AFREZZA INHALATION CARTRIDGE WITH INHALER 12 UNIT, 4 UNIT, 4 UNIT (90)/ 8 UNIT (90), 4 UNIT/8 UNIT/ 12 UNIT (60), 8 UNIT, 8 UNIT (90)/ 12 UNIT (90)	EX	
APIDRA SOLOSTAR U-100 INSULIN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML	EX	
APIDRA U-100 INSULIN SUBCUTANEOUS SOLUTION 100 UNIT/ML	EX	
BASAGLAR KWIKPEN U-100 SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	4	PA
BASAGLAR TEMPO PEN(U-100)INSLN SUBCUTANEOUS INSULIN PEN, SENSOR 100 UNIT/ML (3 ML)	4	PA
FIASP FLEXTOUCH U-100 SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	2	
FIASP PENFILL U-100 INSULIN SUBCUTANEOUS CARTRIDGE 100 UNIT/ML (3 ML)	2	
FIASP PUMPCART SUBCUTANEOUS CARTRIDGE 100 UNIT/ML (1.6 ML)	4	
FIASP U-100 INSULIN SUBCUTANEOUS SOLUTION 100 UNIT/ML	2	
HUMALOG JUNIOR KWIKPEN U-100 SUBCUTANEOUS INSULIN PEN, HALF-UNIT 100 UNIT/ML	EX	

Drug Name	Tier	Requirements / Limits
HUMALOG KWIKPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML, 200 UNIT/ML (3 ML)	EX	
HUMALOG MIX 50-50 KWIKPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (50-50)	EX	
HUMALOG MIX 75-25 KWIKPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (75-25)	EX	
HUMALOG MIX 75-25(U-100)INSULN SUBCUTANEOUS SUSPENSION 100 UNIT/ML (75-25)	EX	
HUMALOG TEMPO PEN(U-100)INSULN SUBCUTANEOUS INSULIN PEN, SENSOR 100 UNIT/ML	EX	
HUMALOG U-100 INSULIN SUBCUTANEOUS CARTRIDGE 100 UNIT/ML	EX	
HUMALOG U-100 INSULIN SUBCUTANEOUS SOLUTION 100 UNIT/ML	EX	
HUMULIN 70/30 U-100 INSULIN SUBCUTANEOUS SUSPENSION 100 UNIT/ML (70-30)	EX	
HUMULIN 70/30 U-100 KWIKPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (70-30)	EX	
HUMULIN N NPH KWIKPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	EX	
HUMULIN N NPH U-100 INSULIN SUBCUTANEOUS SUSPENSION 100 UNIT/ML	EX	
HUMULIN R REGULAR U-100 INSULN INJECTION SOLUTION 100 UNIT/ML	EX	
HUMULIN R U-500 (CONC) INSULIN SUBCUTANEOUS SOLUTION 500 UNIT/ML	2	
HUMULIN R U-500 (CONC) KWIKPEN SUBCUTANEOUS INSULIN PEN 500 UNIT/ML (3 ML)	2	
INSULIN ASP PRT-INSULIN ASPART SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (70-30)	2	
INSULIN ASP PRT-INSULIN ASPART SUBCUTANEOUS SOLUTION 100 UNIT/ML (70-30)	2	

Drug Name	Tier	Requirements / Limits
INSULIN ASPART U-100 SUBCUTANEOUS CARTRIDGE 100 UNIT/ML	2	
INSULIN ASPART U-100 SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	2	
INSULIN ASPART U-100 SUBCUTANEOUS SOLUTION 100 UNIT/ML	2	
INSULIN DEGLUDEC SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML), 200 UNIT/ML (3 ML)	4	PA
INSULIN DEGLUDEC SUBCUTANEOUS SOLUTION 100 UNIT/ML	4	PA
INSULIN GLARGINE U-300 CONC SUBCUTANEOUS INSULIN PEN 300 UNIT/ML (1.5 ML), 300 UNIT/ML (3 ML)	4	PA
INSULIN GLARGINE-YFGN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	4	PA
INSULIN GLARGINE-YFGN SUBCUTANEOUS SOLUTION 100 UNIT/ML	4	PA
INSULIN LISPRO PROTAMIN-LISPRO SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (75-25)	4	PA
INSULIN LISPRO SUBCUTANEOUS INSULIN PEN 100 UNIT/ML	EX	
INSULIN LISPRO SUBCUTANEOUS INSULIN PEN, HALF-UNIT 100 UNIT/ML	4	PA
INSULIN LISPRO SUBCUTANEOUS SOLUTION 100 UNIT/ML	EX	
LANTUS SOLOSTAR U-100 SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	2	
LANTUS U-100 INSULIN SUBCUTANEOUS SOLUTION 100 UNIT/ML	2	
LYUMJEV KWIKPEN U-100 SUBCUTANEOUS INSULIN PEN 100 UNIT/ML	4	PA
LYUMJEV KWIKPEN U-200 SUBCUTANEOUS INSULIN PEN 200 UNIT/ML (3 ML)	4	PA
LYUMJEV TEMPO PEN(U-100)INSULN SUBCUTANEOUS INSULIN PEN, SENSOR 100 UNIT/ML	4	PA

Drug Name	Tier	Requirements / Limits
LYUMJEV U-100 INSULIN SUBCUTANEOUS SOLUTION 100 UNIT/ML	4	PA
NOVOLIN 70-30 FLEXPEN U-100 SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (70-30)	2	
NOVOLIN N FLEXPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	2	
NOVOLIN R FLEXPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	2	
NOVOLOG FLEXPEN U-100 SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	2	
NOVOLOG MIX 70-30 U-100 INSULN SUBCUTANEOUS SOLUTION 100 UNIT/ML (70-30)	2	
NOVOLOG MIX 70-30FLEXPEN U-100 SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (70-30)	2	
NOVOLOG PENFILL U-100 INSULIN SUBCUTANEOUS CARTRIDGE 100 UNIT/ML	2	
NOVOLOG U-100 INSULIN ASPART SUBCUTANEOUS SOLUTION 100 UNIT/ML	2	
NOVOLIN 70/30 SUBCUTANEOUS SUSPENSION 100 UNIT/ML (70-30)	2	
NOVOLIN N SUBCUTANEOUS SUSPENSION 100 UNIT/ML	2	
NOVOLIN R INJECTION SOLUTION 100 UNIT/ML	2	
REZVOGLAR KWIKPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	4	PA
SEMGLEE (INSULIN GLARGINE-YFGN) SUBCUTANEOUS SOLUTION 100 UNIT/ML	4	PA
SEMGLEE (INSULIN GLARG-YFGN) PEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	4	PA
SOLIQUA 100/33 SUBCUTANEOUS INSULIN PEN 100 UNIT-33 MCG/ML	2	PA
TOUJEO MAX U-300 SOLOSTAR SUBCUTANEOUS INSULIN PEN 300 UNIT/ML (3 ML)	2	
TOUJEO SOLOSTAR U-300 SUBCUTANEOUS INSULIN PEN 300 UNIT/ML (1.5 ML)	2	

Drug Name	Tier	Requirements / Limits
TRESIBA FLEXTOUCH U-100 SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	2	
TRESIBA FLEXTOUCH U-200 SUBCUTANEOUS INSULIN PEN 200 UNIT/ML (3 ML)	2	
TRESIBA U-100 INSULIN SUBCUTANEOUS SOLUTION 100 UNIT/ML	2	
XULTOPHY 100/3.6 SUBCUTANEOUS INSULIN PEN 100 UNIT-3.6 MG /ML (3 ML)	2	PA
MISCELLANEOUS HORMONES		
ANDROGEL TRANSDERMAL GEL IN METERED-DOSE PUMP 20.25 MG/1.25 GRAM (1.62 %)	EX	
ANDROGEL TRANSDERMAL GEL IN PACKET 1 % (25 MG/2.5GRAM), 1 % (50 MG/5 GRAM), 1.62 % (20.25 MG/1.25 GRAM), 1.62 % (40.5 MG/2.5 GRAM)	EX	
AVEED INTRAMUSCULAR SOLUTION 750 MG/3 ML (250 MG/ML)	EX	
AZMIRO INTRAMUSCULAR SYRINGE 200 MG/ML	EX	
<i>cabergoline oral tablet 0.5 mg</i>	1	
<i>calcitonin (salmon) injection solution 200 unit/ml</i>	4	
<i>calcitonin (salmon) nasal spray, non-aerosol 200 unit/actuation</i>	1	PA
<i>calcitriol oral capsule 0.25 mcg, 0.5 mcg</i>	1	
<i>calcitriol oral solution 1 mcg/ml</i>	1	
CERDELGA ORAL CAPSULE 84 MG	3	PA; SP; LA
CETROTIDE 0.25 MG VIAL	4	
<i>cinacalcet oral tablet 30 mg, 60 mg, 90 mg</i>	1	PA
CRENESSITY ORAL CAPSULE 100 MG, 25 MG, 50 MG	4	PA; SP
CRENESSITY ORAL SOLUTION 50 MG/ML	4	PA; SP
<i>danazol oral capsule 100 mg, 200 mg, 50 mg</i>	4	
DDAVP ORAL TABLET 0.1 MG, 0.2 MG	4	
DEPO-TESTOSTERONE INTRAMUSCULAR OIL 100 MG/ML, 200 MG/ML	2	
<i>desmopressin injection solution 4 mcg/ml</i>	4	SP; LA

Drug Name	Tier	Requirements / Limits
<i>desmopressin nasal spray, non-aerosol 10 mcg/spray (0.1 ml)</i>	1	
DESMOPRESSIN NASAL SPRAY, NON-AEROSOL 150 MCG/SPRAY (0.1 ML)	4	
<i>desmopressin oral tablet 0.1 mg, 0.2 mg</i>	1	
<i>doxercalciferol oral capsule 0.5 mcg, 1 mcg, 2.5 mcg</i>	4	
GALAFOLD ORAL CAPSULE 123 MG	3	PA; SP; LA
GONAL-F 450 UNITS VIAL, 1,050 UNITS VIAL	4	
GONAL-F RFF REDI-JECT 300 UNIT, 450 UNIT, 900 UNIT	4	
ISTURISA ORAL TABLET 1 MG, 5 MG	4	PA; SP; QL (180 per 30 days)
JATENZO ORAL CAPSULE 158 MG, 198 MG, 237 MG	4	PA; QL (60 per 30 days)
<i>javygtor oral powder in packet 100 mg, 500 mg</i>	4	PA; SP; LA
<i>javygtor oral tablet, soluble 100 mg</i>	4	PA; SP; LA
JYNARQUE ORAL TABLET 15 MG, 30 MG	4	PA; SP; QL (60 per 30 days)
JYNARQUE ORAL TABLETS, SEQUENTIAL 15 MG (AM)/ 15 MG (PM), 30 MG (AM)/ 15 MG (PM), 45 MG (AM)/ 15 MG (PM), 60 MG (AM)/ 30 MG (PM), 90 MG (AM)/ 30 MG (PM)	4	PA; SP; QL (60 per 30 days)
KORLYM ORAL TABLET 300 MG	4	PA; SP
KUVAN ORAL POWDER IN PACKET 100 MG, 500 MG	EX	
KUVAN ORAL TABLET, SOLUBLE 100 MG	EX	
KYZATREX ORAL CAPSULE 100 MG, 150 MG, 200 MG	EX	
METHITEST ORAL TABLET 10 MG	EX	
<i>methyltestosterone oral capsule 10 mg</i>	1	
MIACALCIN INJECTION SOLUTION 200 UNIT/ML	4	
<i>mifepristone oral tablet 300 mg</i>	4	PA; SP; LA
<i>miglustat oral capsule 100 mg</i>	3	PA; SP; LA
MYALEPT SUBCUTANEOUS RECON SOLN 5 MG/ML (FINAL CONC.)	4	PA; SP; LA; QL (27 per 30 days)
NATESTO NASAL GEL IN METERED-DOSE PUMP 5.5 MG/0.122 GRAM/ACTUATION	EX	
OPFOLDA ORAL CAPSULE 65 MG	4	PA; SP; LA

Drug Name	Tier	Requirements / Limits
ORILISSA ORAL TABLET 150 MG, 200 MG	4	PA
PALYNZIQ SUBCUTANEOUS SYRINGE 10 MG/0.5 ML, 2.5 MG/0.5 ML, 20 MG/ML	4	PA; SP; LA
<i>paricalcitol oral capsule 1 mcg, 2 mcg, 4 mcg</i>	1	
RAYALDEE ORAL CAPSULE, EXTENDED RELEASE 24 HR 30 MCG	4	
RECORLEV ORAL TABLET 150 MG	4	PA; SP; QL (240 per 30 days)
ROCALTROL ORAL SOLUTION 1 MCG/ML	4	PA
SAMSCA ORAL TABLET 15 MG, 30 MG	EX	
<i>sapropterin oral powder in packet 100 mg, 500 mg</i>	4	PA; SP; LA
<i>sapropterin oral tablet, soluble 100 mg</i>	4	PA; SP; LA
SENSIPAR ORAL TABLET 30 MG, 60 MG, 90 MG	4	PA
SOMAVERT SUBCUTANEOUS RECON SOLN 10 MG, 15 MG, 20 MG, 25 MG, 30 MG	4	PA; SP; LA
STRENSIQ SUBCUTANEOUS SOLUTION 18 MG/0.45 ML, 28 MG/0.7 ML, 40 MG/ML, 80 MG/0.8 ML	3	PA; SP
SYNAREL NASAL SPRAY, NON-AEROSOL 2 MG/ML	4	PA
TESTIM TRANSDERMAL GEL 50 MG/5 GRAM (1 %)	EX	
<i>testosterone cypionate intramuscular oil 100 mg/ml, 200 mg/ml</i>	1	
<i>testosterone enanthate intramuscular oil 200 mg/ml</i>	1	
<i>testosterone transdermal gel 50 mg/5 gram (1 %)</i>	1	QL (60 per 30 days)
<i>testosterone transdermal gel in metered-dose pump 10 mg/0.5 gram /actuation</i>	1	QL (2 per 30 days)
<i>testosterone transdermal gel in metered-dose pump 12.5 mg/ 1.25 gram (1 %)</i>	1	QL (300 per 30 days)
<i>testosterone transdermal gel in metered-dose pump 20.25 mg/1.25 gram (1.62 %)</i>	1	QL (150 per 30 days)
<i>testosterone transdermal gel in packet 1 % (25 mg/2.5gram), 1.62 % (20.25 mg/1.25 gram)</i>	1	QL (30 per 30 days)
<i>testosterone transdermal gel in packet 1 % (50 mg/5 gram), 1.62 % (40.5 mg/2.5 gram)</i>	1	QL (60 per 30 days)
<i>testosterone transdermal solution in metered pump w/app 30 mg/actuation (1.5 ml)</i>	1	QL (2 per 30 days)
TLANDO ORAL CAPSULE 112.5 MG	EX	

Drug Name	Tier	Requirements / Limits
<i>tolvaptan (polycys kidney dis) oral tablet 15 mg, 30 mg</i>	4	PA; SP; QL (60 per 30 days)
<i>tolvaptan (polycys kidney dis) oral tablets, sequential 15 mg (am)/ 15 mg (pm), 30 mg (am)/ 15 mg (pm), 45 mg (am)/ 15 mg (pm), 60 mg (am)/ 30 mg (pm), 90 mg (am)/ 30 mg (pm)</i>	4	PA; SP; QL (60 per 30 days)
<i>tolvaptan oral tablet 15 mg, 30 mg</i>	4	PA; SP; LA; QL (60 per 30 days)
UNDECATREX ORAL CAPSULE 200 MG	EX	
VOGELXO TRANSDERMAL GEL 50 MG/5 GRAM (1 %)	EX	
VOGELXO TRANSDERMAL GEL IN METERED-DOSE PUMP 12.5 MG/ 1.25 GRAM (1 %)	EX	
VOGELXO TRANSDERMAL GEL IN PACKET 1 % (50 MG/5 GRAM)	EX	
VOXZOGO SUBCUTANEOUS RECON SOLN 0.4 MG, 0.56 MG, 1.2 MG	4	PA; SP; LA
XYOSTED SUBCUTANEOUS AUTO-INJECTOR 100 MG/0.5 ML, 50 MG/0.5 ML, 75 MG/0.5 ML	EX	
YORVIPATH SUBCUTANEOUS PEN INJECTOR 168 MCG/0.56 ML, 294 MCG/0.98 ML, 420 MCG/1.4 ML	3	PA; SP
ZEMPLAR ORAL CAPSULE 1 MCG, 2 MCG	4	PA
NON-INSULIN HYPOGLYCEMIC AGENTS		
<i>acarbose oral tablet 100 mg, 25 mg, 50 mg</i>	1	
ACTOPLUS MET ORAL TABLET 15-850 MG	EX	
ACTOS ORAL TABLET 15 MG, 30 MG, 45 MG	4	
ALOGLIPTIN ORAL TABLET 12.5 MG, 25 MG, 6.25 MG	EX	
ALOGLIPTIN-METFORMIN ORAL TABLET 12.5-1,000 MG, 12.5-500 MG	EX	
ALOGLIPTIN-PIOGLITAZONE ORAL TABLET 12.5-30 MG, 25-15 MG, 25-30 MG, 25-45 MG	EX	
BRENZAVVY ORAL TABLET 20 MG	4	PA
BYDUREON BCISE SUBCUTANEOUS AUTO-INJECTOR 2 MG/0.85 ML	2	PA
CYCLOSET ORAL TABLET 0.8 MG	4	

Drug Name	Tier	Requirements / Limits
DAPAGLIFLOZ PROPANED-METFORMIN ORAL TABLET, IR - ER, BIPHASIC 24HR 10-1,000 MG, 5-1,000 MG	4	PA
DAPAGLIFLOZIN PROPANEDIOL ORAL TABLET 10 MG, 5 MG	4	PA
DUETACT ORAL TABLET 30-2 MG, 30-4 MG	4	
<i>exenatide subcutaneous pen injector 10 mcg/dose(250 mcg/ml) 2.4 ml, 5 mcg/dose (250 mcg/ml) 1.2 ml</i>	1	PA
FARXIGA ORAL TABLET 10 MG, 5 MG	2	PA
<i>glimepiride oral tablet 1 mg, 2 mg, 4 mg</i>	1	
GLIMEPIRIDE ORAL TABLET 3 MG	EX	
<i>glipizide oral tablet 10 mg, 5 mg</i>	1	
GLIPIZIDE ORAL TABLET 2.5 MG	EX	
<i>glipizide oral tablet extended release 24hr 10 mg, 2.5 mg, 5 mg</i>	1	
<i>glipizide-metformin oral tablet 2.5-250 mg, 2.5-500 mg, 5-500 mg</i>	1	
<i>glyburide micronized oral tablet 1.5 mg, 3 mg, 6 mg</i>	1	
<i>glyburide oral tablet 1.25 mg, 2.5 mg, 5 mg</i>	1	
<i>glyburide-metformin oral tablet 1.25-250 mg, 2.5-500 mg, 5-500 mg</i>	1	
GLYXAMBI ORAL TABLET 10-5 MG, 25-5 MG	2	PA
INPEFA ORAL TABLET 200 MG, 400 MG	4	PA
INVOKAMET ORAL TABLET 150-1,000 MG, 150-500 MG, 50-1,000 MG, 50-500 MG	EX	
INVOKAMET XR ORAL TABLET, IR - ER, BIPHASIC 24HR 150-1,000 MG, 150-500 MG, 50-1,000 MG, 50-500 MG	EX	
INVOKANA ORAL TABLET 100 MG, 300 MG	EX	
JANUMET ORAL TABLET 50-1,000 MG, 50-500 MG	2	PA
JANUMET XR ORAL TABLET, ER MULTIPHASE 24 HR 100-1,000 MG, 50-1,000 MG, 50-500 MG	2	PA
JANUVIA ORAL TABLET 100 MG, 25 MG, 50 MG	2	PA
JARDIANCE ORAL TABLET 10 MG, 25 MG	2	PA

Drug Name	Tier	Requirements / Limits
JENTADUETO ORAL TABLET 2.5-1,000 MG, 2.5-500 MG, 2.5-850 MG	2	PA
JENTADUETO XR ORAL TABLET, IR - ER, BIPHASIC 24HR 2.5-1,000 MG, 5-1,000 MG	2	PA
KAZANO ORAL TABLET 12.5-1,000 MG, 12.5-500 MG	EX	
<i>liraglutide subcutaneous pen injector 0.6 mg/0.1 ml (18 mg/3 ml)</i>	1	PA
<i>metformin oral solution 500 mg/5 ml</i>	4	ST
<i>metformin oral tablet 1,000 mg, 500 mg, 850 mg</i>	1	
METFORMIN ORAL TABLET 625 MG	EX	
<i>metformin oral tablet 750 mg</i>	EX	
<i>metformin oral tablet extended release 24 hr 500 mg, 750 mg</i>	1	
<i>metformin oral tablet extended release 24hr 1,000 mg, 500 mg</i>	EX	
<i>metformin oral tablet, er gast.retention 24 hr 1,000 mg, 500 mg</i>	EX	
<i>miglitol oral tablet 100 mg, 25 mg, 50 mg</i>	1	
MOUNJARO SUBCUTANEOUS PEN INJECTOR 10 MG/0.5 ML, 12.5 MG/0.5 ML, 15 MG/0.5 ML, 2.5 MG/0.5 ML, 5 MG/0.5 ML, 7.5 MG/0.5 ML	2	PA
<i>nateglinide oral tablet 120 mg, 60 mg</i>	1	
NESINA ORAL TABLET 12.5 MG, 25 MG	EX	
OSENI ORAL TABLET 25-45 MG	EX	
OZEMPIC SUBCUTANEOUS PEN INJECTOR 0.25 MG OR 0.5 MG (2 MG/3 ML), 1 MG/DOSE (4 MG/3 ML), 2 MG/DOSE (8 MG/3 ML)	2	PA
<i>pioglitazone oral tablet 15 mg, 30 mg, 45 mg</i>	1	
<i>pioglitazone-glimepiride oral tablet 30-2 mg, 30-4 mg</i>	1	
<i>pioglitazone-metformin oral tablet 15-500 mg, 15-850 mg</i>	1	
PRECOSE ORAL TABLET 100 MG, 25 MG, 50 MG	4	
<i>repaglinide oral tablet 0.5 mg, 1 mg, 2 mg</i>	1	
RIOMET ORAL SOLUTION 500 MG/5 ML	4	ST
RYBELSUS ORAL TABLET 14 MG, 3 MG, 7 MG	2	PA

Drug Name	Tier	Requirements / Limits
<i>saxagliptin oral tablet 2.5 mg, 5 mg</i>	1	PA
<i>saxagliptin-metformin oral tablet, er multiphase 24 hr 2.5-1,000 mg, 5-1,000 mg, 5-500 mg</i>	1	PA
SEGLUROMET ORAL TABLET 2.5-1,000 MG, 2.5-500 MG, 7.5-1,000 MG, 7.5-500 MG	4	PA
SITAGLIPTIN-METFORMIN ORAL TABLET, ER MULTIPHASE 24 HR 100-1,000 MG, 50-1,000 MG, 50-500 MG	4	PA
STEGLATRO ORAL TABLET 15 MG, 5 MG	4	PA
STEGLUJAN ORAL TABLET 15-100 MG, 5-100 MG	4	PA
SYNJARDY ORAL TABLET 12.5-1,000 MG, 12.5-500 MG, 5-1,000 MG, 5-500 MG	2	PA
SYNJARDY XR ORAL TABLET, IR - ER, BIPHASIC 24HR 10-1,000 MG, 12.5-1,000 MG, 25-1,000 MG, 5-1,000 MG	2	PA
TRADJENTA ORAL TABLET 5 MG	2	PA
TRIJARDY XR ORAL TABLET, IR - ER, BIPHASIC 24HR 10-5-1,000 MG, 12.5-2.5-1,000 MG, 25-5-1,000 MG, 5-2.5-1,000 MG	2	PA
TRULICITY SUBCUTANEOUS PEN INJECTOR 0.75 MG/0.5 ML, 1.5 MG/0.5 ML, 3 MG/0.5 ML, 4.5 MG/0.5 ML	2	PA
VICTOZA 2-PAK SUBCUTANEOUS PEN INJECTOR 0.6 MG/0.1 ML (18 MG/3 ML)	4	PA
VICTOZA 3-PAK SUBCUTANEOUS PEN INJECTOR 0.6 MG/0.1 ML (18 MG/3 ML)	4	PA
XIGDUO XR ORAL TABLET, IR - ER, BIPHASIC 24HR 10-1,000 MG, 10-500 MG, 2.5-1,000 MG, 5-1,000 MG, 5-500 MG	2	PA
ZITUVIMET ORAL TABLET 50-1,000 MG, 50-500 MG	4	PA
ZITUVIMET XR ORAL TABLET, ER MULTIPHASE 24 HR 100-1,000 MG, 50-1,000 MG, 50-500 MG	4	PA
ZITUVIO ORAL TABLET 100 MG, 25 MG, 50 MG	4	PA
THYROID HORMONES		
<i>adthyza oral tablet 120 mg, 15 mg, 30 mg, 60 mg, 90 mg</i>	4	

Drug Name	Tier	Requirements / Limits
ADTHYZA ORAL TABLET 130 MG, 16.25 MG, 32.5 MG, 65 MG, 97.5 MG	4	
ARMOUR THYROID ORAL TABLET 120 MG, 15 MG, 180 MG, 240 MG, 30 MG, 300 MG, 60 MG, 90 MG	2	
CYTOMEL ORAL TABLET 25 MCG, 5 MCG, 50 MCG	EX	
ERMEZA ORAL SOLUTION 30 MCG/ML	EX	
<i>euthyrox oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 50 mcg, 75 mcg, 88 mcg</i>	4	
<i>levo-t oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 300 mcg, 50 mcg, 75 mcg, 88 mcg</i>	4	
LEVOTHYROXINE ORAL CAPSULE 100 MCG, 112 MCG, 125 MCG, 13 MCG, 137 MCG, 150 MCG, 175 MCG, 200 MCG, 25 MCG, 50 MCG, 75 MCG, 88 MCG	EX	
<i>levothyroxine oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 300 mcg, 50 mcg, 75 mcg, 88 mcg</i>	1	
<i>levoxyl oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 50 mcg, 75 mcg, 88 mcg</i>	1	
<i>liothyronine oral tablet 25 mcg, 5 mcg, 50 mcg</i>	1	
<i>niva thyroid oral tablet 120 mg, 15 mg, 30 mg, 60 mg, 90 mg</i>	4	
<i>np thyroid oral tablet 120 mg, 15 mg, 30 mg, 60 mg, 90 mg</i>	1	
<i>renthyroid oral tablet 120 mg, 15 mg, 30 mg, 60 mg, 90 mg</i>	EX	
SYNTHROID ORAL TABLET 100 MCG, 112 MCG, 125 MCG, 137 MCG, 150 MCG, 175 MCG, 200 MCG, 25 MCG, 300 MCG, 50 MCG, 75 MCG, 88 MCG	2	
THYQUIDITY ORAL SOLUTION 20 MCG/ML	4	
<i>thyroid (pork) oral tablet 120 mg, 15 mg, 30 mg, 60 mg, 90 mg</i>	1	
TIROSINT ORAL CAPSULE 100 MCG, 112 MCG, 125 MCG, 13 MCG, 137 MCG, 150 MCG, 175 MCG, 200 MCG, 25 MCG, 37.5 MCG, 44 MCG, 50 MCG, 62.5 MCG, 75 MCG, 88 MCG	EX	

Drug Name	Tier	Requirements / Limits
TIROSINT-SOL ORAL SOLUTION 100 MCG/ML, 112 MCG/ML, 125 MCG/ML, 13 MCG/ML, 137 MCG/ML, 150 MCG/ML, 175 MCG/ML, 200 MCG/ML, 25 MCG/ML, 37.5 MCG/ML, 44 MCG/ML, 50 MCG/ML, 62.5 MCG/ML, 75 MCG/ML, 88 MCG/ML	EX	
<i>unithroid oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 300 mcg, 50 mcg, 75 mcg, 88 mcg</i>	1	

GASTROENTEROLOGY

ANTIDIARRHEALS & ANTISPASMODICS

<i>anaspaz oral tablet, disintegrating 0.125 mg</i>	1	
<i>belladonna alkaloids-opium rectal suppository 16.2-30 mg, 16.2-60 mg</i>	1	PA
<i>chlordiazepoxide-clidinium oral capsule 5-2.5 mg</i>	4	
CUVPOSA ORAL SOLUTION 1 MG/5 ML (0.2 MG/ML)	EX	
DARTISLA ORAL TABLET, DISINTEGRATING 1.7 MG	4	PA
<i>dicyclomine oral capsule 10 mg</i>	1	
<i>dicyclomine oral solution 10 mg/5 ml</i>	1	
<i>dicyclomine oral tablet 20 mg</i>	1	
<i>diphenoxylate-atropine oral liquid 2.5-0.025 mg/5 ml</i>	1	
<i>diphenoxylate-atropine oral tablet 2.5-0.025 mg</i>	1	
DONNATAL ORAL ELIXIR 16.2-0.1037 -0.0194 MG/5 ML	4	
DONNATAL ORAL TABLET 16.2-0.1037 -0.0194 MG	4	
<i>ed-spaz oral tablet, disintegrating 0.125 mg</i>	1	
GLYCATE ORAL TABLET 1.5 MG	4	
<i>glycopyrrolate oral solution 1 mg/5 ml (0.2 mg/ml)</i>	4	
<i>glycopyrrolate oral tablet 1 mg, 1.5 mg, 2 mg</i>	1	
<i>hyoscyamine sulfate oral drops 0.125 mg/ml</i>	1	
<i>hyoscyamine sulfate oral elixir 0.125 mg/5 ml</i>	1	
<i>hyoscyamine sulfate oral tablet 0.125 mg</i>	1	
<i>hyoscyamine sulfate oral tablet extended release 12 hr 0.375 mg</i>	1	

Drug Name	Tier	Requirements / Limits
<i>hyoscyamine sulfate oral tablet, disintegrating 0.125 mg</i>	1	
<i>hyoscyamine sulfate sublingual tablet 0.125 mg</i>	1	
<i>hyosyne oral drops 0.125 mg/ml</i>	1	
<i>hyosyne oral elixir 0.125 mg/5 ml</i>	1	
LEVBID ORAL TABLET EXTENDED RELEASE 12 HR 0.375 MG	4	
LEVSIN ORAL TABLET 0.125 MG	4	
LEVSIN/SL SUBLINGUAL TABLET 0.125 MG	EX	
LIBRAX (WITH CLIDINIUM) ORAL CAPSULE 5-2.5 MG	EX	
LOMOTIL ORAL TABLET 2.5-0.025 MG	4	
<i>loperamide oral capsule 2 mg</i>	1	
<i>methscopolamine oral tablet 2.5 mg, 5 mg</i>	1	
MOTOFEN ORAL TABLET 1-0.025 MG	4	
MYTESI ORAL TABLET, DELAYED RELEASE (DR/EC) 125 MG	EX	
NULEV ORAL TABLET, DISINTEGRATING 0.125 MG	4	
<i>opium oral tincture 10 mg/ml (morphine)</i>	4	
<i>oscimin oral tablet 0.125 mg</i>	1	
<i>oscimin sl sublingual tablet 0.125 mg</i>	1	
<i>phenobarb-hyoscy-atropine-scop oral elixir 16.2-0.1037 -0.0194 mg/5 ml</i>	4	
<i>phenobarb-hyoscy-atropine-scop oral tablet 16.2-0.1037 -0.0194 mg</i>	4	
<i>phenohydro oral elixir 16.2-0.1037 -0.0194 mg/5 ml</i>	4	
<i>phenohydro oral tablet 16.2-0.1037 -0.0194 mg</i>	1	
ROBINUL FORTE ORAL TABLET 2 MG	4	
ROBINUL ORAL TABLET 1 MG	4	
SYMAX DUOTAB ORAL TABLET, EXT RELEASE MULTIPHASE 0.125 MG-0.25 MG (0.375 MG)	4	
<i>symax fastabs oral tablet, disintegrating 0.125 mg</i>	1	
<i>symax-sl sublingual tablet 0.125 mg</i>	4	
<i>symax-sr oral tablet extended release 12 hr 0.375 mg</i>	1	

Drug Name	Tier	Requirements / Limits
MISCELLANEOUS GASTROINTESTINAL AGENTS		
AKYNZEO (NETUPITANT) ORAL CAPSULE 300-0.5 MG	EX	
<i>alosetron oral tablet 0.5 mg, 1 mg</i>	4	
<i>alvimopan oral capsule 12 mg</i>	4	
AMITIZA ORAL CAPSULE 24 MCG, 8 MCG	4	PA
ANALPRAM-HC RECTAL CREAM 1-1 %	4	
ANALPRAM-HC RECTAL CREAM 2.5-1 %	EX	
ANTIVERT ORAL TABLET 50 MG	4	
ANTIVERT ORAL TABLET, CHEWABLE 25 MG	4	
<i>anucort-hc rectal suppository 25 mg</i>	4	
ANUSOL-HC RECTAL SUPPOSITORY 25 MG	EX	
ANUSOL-HC TOPICAL CREAM WITH PERINEAL APPLICATOR 2.5 %	EX	
<i>aprepitant oral capsule 125 mg, 40 mg</i>	1	QL (1 per 30 days)
<i>aprepitant oral capsule 80 mg</i>	1	QL (2 per 30 days)
<i>aprepitant oral capsule, dose pack 125 mg (1)- 80 mg (2)</i>	1	QL (1 per 30 days)
APRISO ORAL CAPSULE, EXTENDED RELEASE 24HR 0.375 GRAM	EX	
AZULFIDINE EN-TABS ORAL TABLET, DELAYED RELEASE (DR/EC) 500 MG	4	
AZULFIDINE ORAL TABLET 500 MG	4	
<i>balsalazide oral capsule 750 mg</i>	1	
<i>betaine oral powder 1 gram/scoop</i>	4	SP; LA
BONJESTA ORAL TABLET, IR, DELAYED REL, BIPHASIC 20-20 MG	EX	
<i>budesonide oral capsule, delayed, extend.release 3 mg</i>	1	
<i>budesonide oral tablet, delayed and ext.release 9 mg</i>	4	
<i>budesonide rectal foam 2 mg/actuation</i>	4	
BYLVAY ORAL CAPSULE 1,200 MCG, 400 MCG	4	PA; SP; LA
BYLVAY ORAL PELLETT 200 MCG, 600 MCG	4	PA; SP; LA
CANASA RECTAL SUPPOSITORY 1,000 MG	4	
CHENODAL ORAL TABLET 250 MG	4	SP

Drug Name	Tier	Requirements / Limits
CHOLBAM ORAL CAPSULE 250 MG, 50 MG	4	PA; SP
CIMZIA POWDER FOR RECONST SUBCUTANEOUS KIT 400 MG (200 MG X 2 VIALS)	4	PA; SP; LA
CIMZIA SUBCUTANEOUS SYRINGE KIT 400 MG/2 ML (200 MG/ML X 2)	4	PA; SP; LA
<i>clearlax oral powder 17 gram/dose</i>	4	ACA PV
CLENPIQ ORAL SOLUTION 10 MG-3.5 GRAM- 12 GRAM/175 ML	4	ACA PV
COLAZAL ORAL CAPSULE 750 MG	EX	
COMPAZINE ORAL TABLET 10 MG, 5 MG	4	
COMPAZINE RECTAL SUPPOSITORY 25 MG	EX	
<i>compro rectal suppository 25 mg</i>	1	
<i>constulose oral solution 10 gram/15 ml</i>	1	
CORTENEMA RECTAL ENEMA 100 MG/60 ML	EX	
CORTIFOAM RECTAL FOAM 10 % (80 MG)	EX	
CREON ORAL CAPSULE,DELAYED RELEASE (DR/EC) 12,000-38,000 -60,000 UNIT, 24,000-76,000 -120,000 UNIT, 3,000- 9,500- 15,000 UNIT, 36,000-114,000- 180,000 UNIT, 6,000-19,000 -30,000 UNIT	2	
<i>cromolyn oral concentrate 100 mg/5 ml</i>	1	
CTEXLI ORAL TABLET 250 MG	4	PA; SP
CYSTADANE ORAL POWDER 1 GRAM/SCOOP	EX	
DICLEGIS ORAL TABLET, DELAYED RELEASE (DR/EC) 10-10 MG	4	PA
DIPENTUM ORAL CAPSULE 250 MG	EX	
<i>doxylamine-pyridoxine (vit b6) oral tablet, delayed release (dr/ec) 10-10 mg</i>	4	
<i>dronabinol oral capsule 10 mg, 2.5 mg, 5 mg</i>	4	
EMEND ORAL CAPSULE 80 MG	EX	
EMEND ORAL CAPSULE, DOSE PACK 125 MG (1)- 80 MG (2)	EX	
EMEND ORAL SUSPENSION FOR RECONSTITUTION 125 MG (25 MG/ ML FINAL CONC.)	EX	
ENTYVIO PEN SUBCUTANEOUS PEN INJECTOR 108 MG/0.68 ML	4	PA; SP; LA

Drug Name	Tier	Requirements / Limits
<i>enulose oral solution 10 gram/15 ml</i>	1	
EOHILIA ORAL SUSPENSION IN PACKET 2 MG/10 ML	4	PA
GASTROCROM ORAL CONCENTRATE 100 MG/5 ML	4	
GATTEX 30-VIAL SUBCUTANEOUS KIT 5 MG	4	PA; SP; LA
<i>gavilyte-c oral recon soln 240-22.72-6.72 -5.84 gram</i>	1	ACA PV
<i>gavilyte-g oral recon soln 236-22.74-6.74 -5.86 gram</i>	1	ACA PV
<i>gavilyte-n oral recon soln 420 gram</i>	1	ACA PV
<i>generlac oral solution 10 gram/15 ml</i>	1	
<i>gentle laxative (mag hydrox) oral suspension 400 mg/5 ml</i>	4	ACA PV
GIMOTI NASAL SPRAY WITH PUMP 15 MG/SPRAY	4	PA; SP
GOLYTELY ORAL RECON SOLN 236-22.74-6.74 -5.86 GRAM	4	
<i>granisetron hcl oral tablet 1 mg</i>	1	QL (6 per 30 days)
<i>hemmorex-hc rectal suppository 25 mg, 30 mg</i>	4	
<i>hydrocortisone acetate rectal suppository 25 mg, 30 mg</i>	1	
<i>hydrocortisone rectal enema 100 mg/60 ml</i>	1	
<i>hydrocortisone topical cream with perineal applicator 1 %, 2.5 %</i>	1	
<i>hydrocortisone-pramoxine rectal cream 1-1 %, 2.5-1 %, 2.5-1 % (4g)</i>	1	
HYDROCORTISONE-PRAMOXINE RECTAL SUPPOSITORY 25-18 MG	EX	
IBSRELA ORAL TABLET 50 MG	4	PA
IQIRVO ORAL TABLET 80 MG	4	PA; SP; LA; QL (30 per 30 days)
KRISTALOSE ORAL PACKET 10 GRAM, 20 GRAM	EX	
<i>lactulose oral packet 10 gram</i>	4	
<i>lactulose oral packet 20 gram</i>	EX	
<i>lactulose oral solution 10 gram/15 ml</i>	1	
<i>laxative peg 3350 oral powder 17 gram/dose</i>	4	ACA PV

Drug Name	Tier	Requirements / Limits
LIALDA ORAL TABLET, DELAYED RELEASE (DR/EC) 1.2 GRAM	EX	
<i>lidocaine hcl-hydrocortison ac rectal cream 3-0.5 %</i>	1	
LIDOCAINE HCL-HYDROCORTISON AC RECTAL GEL 3 %-2.5 % (7 GRAM)	4	
<i>lidocaine hcl-hydrocortison ac rectal kit 2 %-2 % (7 gram), 3-0.5 %, 3-2.5 % (7 gram)</i>	EX	
<i>lidocaine-hydrocortisone-aloe rectal gel 2.8-0.55 %</i>	1	
LINZESS ORAL CAPSULE 145 MCG, 290 MCG, 72 MCG	4	PA
LIVDELZI ORAL CAPSULE 10 MG	4	PA; SP; QL (30 per 30 days)
LIVMARLI ORAL SOLUTION 19 MG/ML, 9.5 MG/ML	4	PA; SP
LIVMARLI ORAL TABLET 10 MG, 15 MG, 30 MG	4	PA; SP; QL (30 per 30 days)
LIVMARLI ORAL TABLET 20 MG	4	PA; SP; QL (60 per 30 days)
LOTRONEX ORAL TABLET 0.5 MG, 1 MG	4	
<i>lubiprostone oral capsule 24 mcg, 8 mcg</i>	4	
MARINOL ORAL CAPSULE 10 MG, 2.5 MG, 5 MG	4	
<i>meclizine oral tablet 12.5 mg, 25 mg</i>	1	
<i>meclizine oral tablet 50 mg</i>	4	
<i>mesalamine oral capsule (with del rel tablets) 400 mg</i>	1	
<i>mesalamine oral capsule, extended release 500 mg</i>	4	
<i>mesalamine oral capsule, extended release 24hr 0.375 gram</i>	1	
<i>mesalamine oral tablet, delayed release (dr/ec) 1.2 gram, 800 mg</i>	1	
<i>mesalamine rectal enema 4 gram/60 ml</i>	1	
<i>mesalamine rectal suppository 1,000 mg</i>	1	
<i>mesalamine with cleansing wipe rectal enema kit 4 gram/60 ml</i>	1	ST
<i>metoclopramide hcl oral solution 5 mg/5 ml</i>	1	
<i>metoclopramide hcl oral tablet 10 mg, 5 mg</i>	1	
MOTEGRITY ORAL TABLET 1 MG, 2 MG	4	PA
MOVANTI K ORAL TABLET 12.5 MG, 25 MG	4	PA

Drug Name	Tier	Requirements / Limits
MOVIPREP ORAL POWDER IN PACKET 100-7.5-2.691 GRAM	4	
<i>nitroglycerin rectal ointment 0.4 % (w/w)</i>	4	
OALIVA ORAL TABLET 10 MG, 5 MG	4	PA; SP; LA; QL (30 per 30 days)
OMVOH PEN SUBCUTANEOUS PEN INJECTOR 100 MG/ML, 300MG/3ML(100MG /ML-200 MG/2ML)	3	PA; SP; LA
OMVOH SUBCUTANEOUS SYRINGE 100 MG/ML, 300MG/3ML(100MG /ML-200 MG/2ML)	3	PA; SP; LA
<i>ondansetron hcl (pf) injection solution 4 mg/2 ml</i>	1	
<i>ondansetron hcl oral solution 4 mg/5 ml</i>	1	QL (2 per 30 days)
<i>ondansetron hcl oral tablet 4 mg, 8 mg</i>	1	QL (9 per 30 days)
ONDANSETRON ORAL TABLET, DISINTEGRATING 16 MG	EX	
<i>ondansetron oral tablet, disintegrating 4 mg, 8 mg</i>	1	QL (9 per 30 days)
<i>onelax magnesium citrate oral solution</i>	4	ACA PV
PANCREAZE ORAL CAPSULE, DELAYED RELEASE (DR/EC) 10,500-35,500- 61,500 UNIT, 16,800-56,800- 98,400 UNIT, 2,600-8,800-15,200 UNIT, 21,000-54,700- 83,900 UNIT, 37,000-97,300- 149,900 UNIT, 4,200-14,200-24,600 UNIT	EX	
<i>peg 3350-electrolytes oral recon soln 236-22.74-6.74 -5.86 gram</i>	1	ACA PV
<i>peg3350-sod sul-nacl-kcl-asb-c oral powder in packet 100-7.5-2.691 gram</i>	1	ACA PV
<i>peg-electrolyte oral recon soln 420 gram</i>	1	ACA PV
PENTASA ORAL CAPSULE, EXTENDED RELEASE 250 MG, 500 MG	EX	
PERTZYE ORAL CAPSULE, DELAYED RELEASE (DR/EC) 16,000-57,500- 60,500 UNIT, 24,000-86,250- 90,750 UNIT, 4,000-14,375- 15,125 UNIT, 8,000-28,750- 30,250 UNIT	EX	
PLENVU ORAL POWDER IN PACKET, SEQUENTIAL 140-9-5.2 GRAM	4	ACA PV
<i>prochlorperazine maleate oral tablet 10 mg, 5 mg</i>	1	
<i>prochlorperazine rectal suppository 25 mg</i>	1	
PROCORT RECTAL CREAM 1.85-1.15 %	EX	

Drug Name	Tier	Requirements / Limits
PROCTOCORT RECTAL SUPPOSITORY 30 MG	EX	
PROCTOFOAM HC RECTAL FOAM 1-1 %	EX	
<i>procto-med hc topical cream with perineal applicator 2.5 %</i>	1	
<i>proctosol hc topical cream with perineal applicator 2.5 %</i>	1	
<i>proctozone-hc topical cream with perineal applicator 2.5 %</i>	1	
<i>prucalopride oral tablet 1 mg, 2 mg</i>	4	PA
RECTIV RECTAL OINTMENT 0.4 % (W/W)	4	
REGLAN ORAL TABLET 10 MG, 5 MG	4	
RELISTOR ORAL TABLET 150 MG	4	
RELISTOR SUBCUTANEOUS SOLUTION 12 MG/0.6 ML	4	
RELISTOR SUBCUTANEOUS SYRINGE 12 MG/0.6 ML, 8 MG/0.4 ML	4	
RELTONE ORAL CAPSULE 200 MG, 400 MG	4	
ROWASA RECTAL ENEMA KIT 4 GRAM/60 ML	EX	
SANCUSO TRANSDERMAL PATCH WEEKLY 3.1 MG/24 HOUR	EX	
<i>scopolamine base transdermal patch 3 day 1 mg over 3 days</i>	1	
SFROWASA RECTAL ENEMA 4 GRAM/60 ML	EX	
SKYRIZI SUBCUTANEOUS WEARABLE INJECTOR 180 MG/1.2 ML (150 MG/ML), 360 MG/2.4 ML (150 MG/ML)	3	PA; SP; LA
<i>sodium, potassium, mag sulfates oral recon soln 17.5-3.13-1.6 gram</i>	4	ACA PV
SUCRAID ORAL SOLUTION 8,500 UNIT/ML	4	PA; SP; QL (236 per 30 days)
SUFLAVE ORAL RECON SOLN 178.7-7.3-0.5 GRAM	4	ACA PV
<i>sulfasalazine oral tablet 500 mg</i>	1	
<i>sulfasalazine oral tablet, delayed release (dr/ec) 500 mg</i>	1	
SUPREP BOWEL PREP KIT ORAL RECON SOLN 17.5-3.13-1.6 GRAM	4	ST
SUTAB ORAL TABLET 1.479-0.188- 0.225 GRAM	4	ACA PV

Drug Name	Tier	Requirements / Limits
SYMPROIC ORAL TABLET 0.2 MG	4	
SYNDROS ORAL SOLUTION 5 MG/ML	4	
TRANSDERM-SCOP TRANSDERMAL PATCH 3 DAY 1 MG OVER 3 DAYS	4	
<i>trimethobenzamide oral capsule 300 mg</i>	1	
TRULANCE ORAL TABLET 3 MG	EX	
UCERIS ORAL TABLET, DELAYED AND EXT.RELEASE 9 MG	EX	
UCERIS RECTAL FOAM 2 MG/ACTUATION	EX	
URSO FORTE ORAL TABLET 500 MG	4	
<i>ursodiol oral capsule 200 mg, 400 mg</i>	4	
<i>ursodiol oral capsule 300 mg</i>	1	
<i>ursodiol oral tablet 250 mg, 500 mg</i>	1	
VARUBI ORAL TABLET 90 MG	4	PA
VELSIPITY ORAL TABLET 2 MG	3	PA; SP; LA
VIBERZI ORAL TABLET 100 MG, 75 MG	2	PA
VIOKACE ORAL TABLET 10,440-39,150-39,150 UNIT, 20,880-78,300- 78,300 UNIT	EX	
VOWST ORAL CAPSULE	4	PA; SP
ZENPEP ORAL CAPSULE, DELAYED RELEASE (DR/EC) 10,000-32,000 -42,000 UNIT, 15,000-47,000 -63,000 UNIT, 20,000-63,000- 84,000 UNIT, 25,000-79,000- 105,000 UNIT, 3,000-10,000 -14,000-UNIT, 40,000-126,000- 168,000 UNIT, 5,000-17,000- 24,000 UNIT, 60,000-189,600- 252,600 UNIT	2	
ZYMFENTRA SUBCUTANEOUS PEN INJECTOR KIT 120 MG/ML	3	PA; SP
ZYMFENTRA SUBCUTANEOUS SYRINGE KIT 120 MG/ML	3	PA; SP
ULCER THERAPY		
ACIPHEX ORAL TABLET, DELAYED RELEASE (DR/EC) 20 MG	EX	
<i>amoxicil-clarithromy-lansopraz oral combo pack 500-500-30 mg</i>	1	
<i>bismuth subcit k-metronidz-ten oral capsule 140-125-125 mg</i>	4	PA
CARAFATE ORAL SUSPENSION 100 MG/ML	EX	
CARAFATE ORAL TABLET 1 GRAM	EX	

Drug Name	Tier	Requirements / Limits
<i>cimetidine hcl oral solution 300 mg/5 ml</i>	EX	
<i>cimetidine oral tablet 200 mg, 300 mg, 400 mg, 800 mg</i>	EX	
CYTOTEC ORAL TABLET 100 MCG, 200 MCG	4	
DEXILANT ORAL CAPSULE, BIPHASE DELAYED RELEAS 30 MG, 60 MG	EX	
<i>dexlansoprazole oral capsule, biphasic delayed release 30 mg, 60 mg</i>	EX	
<i>esomeprazole magnesium oral capsule, delayed release (dr/ec) 40 mg</i>	EX	
<i>esomeprazole magnesium oral granules dr for susp in packet 10 mg, 2.5 mg, 20 mg, 40 mg, 5 mg</i>	EX	
<i>famotidine oral suspension for reconstitution 40 mg/5 ml (8 mg/ml)</i>	1	
<i>famotidine oral tablet 20 mg, 40 mg</i>	1	
KONVOMEF ORAL SUSPENSION FOR RECONSTITUTION 2-84 MG/ML	EX	
<i>lansoprazole oral capsule, delayed release (dr/ec) 15 mg, 30 mg</i>	EX	
<i>lansoprazole oral tablet, disintegrat, delay rel 15 mg, 30 mg</i>	EX	
<i>misoprostol oral tablet 100 mcg, 200 mcg</i>	1	
NEXIUM ORAL CAPSULE, DELAYED RELEASE(DR/EC) 20 MG, 40 MG	EX	
NEXIUM PACKET ORAL GRANULES DR FOR SUSP IN PACKET 10 MG, 2.5 MG, 20 MG, 40 MG, 5 MG	EX	
<i>nizatidine oral capsule 150 mg, 300 mg</i>	EX	
OMECLAMOX-PAK ORAL COMBO PACK 20 MG-500 MG- 500 MG (40)	4	
<i>omeprazole oral capsule, delayed release(dr/ec) 10 mg, 20 mg, 40 mg</i>	1	
<i>omeprazole-sodium bicarbonate oral capsule 20-1.1 mg-gram, 40-1.1 mg-gram</i>	EX	
<i>omeprazole-sodium bicarbonate oral packet 20-1,680 mg, 40-1,680 mg</i>	EX	
<i>pantoprazole oral granules dr for susp in packet 40 mg</i>	4	
<i>pantoprazole oral tablet, delayed release (dr/ec) 20 mg, 40 mg</i>	1	

Drug Name	Tier	Requirements / Limits
PEPCID ORAL TABLET 20 MG, 40 MG	EX	
PREVACID ORAL CAPSULE, DELAYED RELEASE (DR/EC) 30 MG	EX	
PREVACID SOLUTAB ORAL TABLET, DISINTEGRAT, DELAY REL 15 MG, 30 MG	EX	
PRILOSEC ORAL SUSP, DELAYED RELEASE FOR RECON 10 MG, 2.5 MG	EX	
PROTONIX ORAL GRANULES DR FOR SUSP IN PACKET 40 MG	EX	
PROTONIX ORAL TABLET, DELAYED RELEASE (DR/EC) 20 MG, 40 MG	EX	
PYLERA ORAL CAPSULE 140-125-125 MG	4	PA
RABEPRAZOLE ORAL CAPSULE, DELAYED REL SPRINKLE 10 MG	EX	
<i>rabeprazole oral tablet, delayed release (dr/ec) 20 mg</i>	EX	
<i>sucralfate oral suspension 100 mg/ml</i>	4	
<i>sucralfate oral tablet 1 gram</i>	1	
TALICIA ORAL CAPSULE, IR - DELAY REL, BIPHASE 10-250-12.5 MG	4	
VOQUEZNA DUAL PAK ORAL COMBO PACK 20 MG (28)- 500 MG (84)	4	PA
VOQUEZNA ORAL TABLET 10 MG, 20 MG	4	PA
VOQUEZNA TRIPLE PAK ORAL COMBO PACK 20-500-500 MG	4	PA

IMMUNOLOGY, VACCINES & BIOTECHNOLOGY

BIOTECHNOLOGY DRUGS

ARANESP (IN POLYSORBATE) INJECTION SOLUTION 100 MCG/ML, 200 MCG/ML, 25 MCG/ML, 40 MCG/ML, 60 MCG/ML	4	PA; SP; LA
ARANESP (IN POLYSORBATE) INJECTION SYRINGE 10 MCG/0.4 ML, 100 MCG/0.5 ML, 150 MCG/0.3 ML, 200 MCG/0.4 ML, 25 MCG/0.42 ML, 300 MCG/0.6 ML, 40 MCG/0.4 ML, 500 MCG/ML, 60 MCG/0.3 ML	4	PA; SP; LA
ARCALYST SUBCUTANEOUS RECON SOLN 220 MG	4	PA; SP
EPOGEN INJECTION SOLUTION 10,000 UNIT/ML, 2,000 UNIT/ML, 20,000 UNIT/2 ML, 20,000 UNIT/ML, 3,000 UNIT/ML, 4,000 UNIT/ML	3	PA; SP; LA

Drug Name	Tier	Requirements / Limits
FULPHILA SUBCUTANEOUS SYRINGE 6 MG/0.6 ML	3	PA; SP
FYLNETRA SUBCUTANEOUS SYRINGE 6 MG/0.6 ML	4	PA; SP
GRANIX SUBCUTANEOUS SOLUTION 300 MCG/ML, 480 MCG/1.6 ML	3	SP
GRANIX SUBCUTANEOUS SYRINGE 300 MCG/0.5 ML, 480 MCG/0.8 ML	3	SP
ILARIS (PF) SUBCUTANEOUS SOLUTION 150 MG/ML	4	PA; SP; LA
LEUKINE INJECTION RECON SOLN 250 MCG	4	PA; SP; LA
MIRCERA INJECTION SYRINGE 100 MCG/0.3 ML, 120 MCG/0.3 ML, 150 MCG/0.3 ML, 200 MCG/0.3 ML, 30 MCG/0.3 ML, 50 MCG/0.3 ML, 75 MCG/0.3 ML	4	PA; SP
MOZOBIL SUBCUTANEOUS SOLUTION 24 MG/1.2 ML (20 MG/ML)	4	SP; LA
NEULASTA ONPRO SUBCUTANEOUS SYRINGE, W/ WEARABLE INJECTOR 6 MG/0.6 ML	EX	
NEULASTA SUBCUTANEOUS SYRINGE 6 MG/0.6 ML	EX	
NEUPOGEN INJECTION SOLUTION 300 MCG/ML, 480 MCG/1.6 ML	4	PA; SP
NEUPOGEN INJECTION SYRINGE 300 MCG/0.5 ML, 480 MCG/0.8 ML	4	PA; SP
NIVESTYM INJECTION SOLUTION 300 MCG/ML, 480 MCG/1.6 ML	3	SP
NIVESTYM SUBCUTANEOUS SYRINGE 300 MCG/0.5 ML, 480 MCG/0.8 ML	3	SP
NYPOZI INJECTION SYRINGE 300 MCG/0.5 ML, 480 MCG/0.8 ML	4	PA; SP
NYVEPRIA SUBCUTANEOUS SYRINGE 6 MG/0.6 ML	4	PA; SP
PROCRIT INJECTION SOLUTION 10,000 UNIT/ML, 2,000 UNIT/ML, 20,000 UNIT/2 ML, 20,000 UNIT/ML, 3,000 UNIT/ML, 4,000 UNIT/ML, 40,000 UNIT/ML	3	PA; SP; LA
RELEUKO SUBCUTANEOUS SYRINGE 300 MCG/0.5 ML, 480 MCG/0.8 ML	4	PA; SP

Drug Name	Tier	Requirements / Limits
RETACRIT INJECTION SOLUTION 10,000 UNIT/ML, 2,000 UNIT/ML, 20,000 UNIT/2 ML, 20,000 UNIT/ML, 3,000 UNIT/ML, 4,000 UNIT/ML, 40,000 UNIT/ML	3	PA; SP; LA
ROLVEDON SUBCUTANEOUS SYRINGE 13.2 MG/0.6 ML	4	PA; SP
RYZNEUTA SUBCUTANEOUS SYRINGE 20 MG/ML	4	PA; SP
STIMUFEND SUBCUTANEOUS SYRINGE 6 MG/0.6 ML	4	PA; SP
UDENYCA AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR 6 MG/0.6 ML	3	PA; SP
UDENYCA ONBODY SUBCUTANEOUS SYRINGE, W/ WEARABLE INJECTOR 6 MG/0.6 ML	3	PA; SP
UDENYCA SUBCUTANEOUS SYRINGE 6 MG/0.6 ML	3	PA; SP
XOLREMDI ORAL CAPSULE 100 MG	4	PA; SP
ZARXIO INJECTION SYRINGE 300 MCG/0.5 ML, 480 MCG/0.8 ML	4	PA; SP
ZIEXTENZO SUBCUTANEOUS SYRINGE 6 MG/0.6 ML	4	PA; SP
GROWTH HORMONES		
GENOTROPIN MINIQUICK SUBCUTANEOUS SYRINGE 0.2 MG/0.25 ML, 0.4 MG/0.25 ML, 0.6 MG/0.25 ML, 0.8 MG/0.25 ML, 1 MG/0.25 ML, 1.2 MG/0.25 ML, 1.4 MG/0.25 ML, 1.6 MG/0.25 ML, 1.8 MG/0.25 ML, 2 MG/0.25 ML	3	PA; SP; LA
GENOTROPIN SUBCUTANEOUS CARTRIDGE 12 MG/ML (36 UNIT/ML), 5 MG/ML (15 UNIT/ML)	3	PA; SP; LA
HUMATROPE INJECTION CARTRIDGE 12 MG (36 UNIT), 24 MG (72 UNIT), 6 MG (18 UNIT)	EX	
NGENLA SUBCUTANEOUS PEN INJECTOR 24 MG/1.2 ML (20 MG/ML), 60 MG/1.2 ML (50 MG/ML)	4	PA; SP; LA
NORDITROPIN FLEXPEN SUBCUTANEOUS PEN INJECTOR 10 MG/1.5 ML (6.7 MG/ML), 15 MG/1.5 ML (10 MG/ML), 30 MG/3 ML (10 MG/ML), 5 MG/1.5 ML (3.3 MG/ML)	EX	

Drug Name	Tier	Requirements / Limits
NUTROPIN AQ NUSPIN SUBCUTANEOUS PEN INJECTOR 10 MG/2 ML (5 MG/ML), 20 MG/2 ML (10 MG/ML), 5 MG/2 ML (2.5 MG/ML)	EX	
OMNITROPE SUBCUTANEOUS CARTRIDGE 10 MG/1.5 ML (6.7 MG/ML), 5 MG/1.5 ML (3.3 MG/ML)	3	PA; SP; LA
OMNITROPE SUBCUTANEOUS RECON SOLN 5.8 MG	3	PA; SP; LA
SEROSTIM SUBCUTANEOUS RECON SOLN 4 MG, 5 MG, 6 MG	4	PA; SP; LA
SKYTROFA SUBCUTANEOUS CARTRIDGE 11 MG, 13.3 MG, 3 MG, 3.6 MG, 4.3 MG, 5.2 MG, 6.3 MG, 7.6 MG, 9.1 MG	4	PA; SP; LA
SOGROYA SUBCUTANEOUS PEN INJECTOR 10 MG/1.5 ML (6.7 MG/ML), 15 MG/1.5 ML (10 MG/ML), 5 MG/1.5 ML (3.3 MG/ML)	4	PA; SP; LA
ZOMACTON SUBCUTANEOUS RECON SOLN 10 MG, 5 MG	EX	
INTERFERONS		
ACTIMMUNE SUBCUTANEOUS SOLUTION 100 MCG/0.5 ML	4	PA; SP; LA
BESREMI SUBCUTANEOUS SYRINGE 500 MCG/ML	3	PA; SP
PEGASYS SUBCUTANEOUS SOLUTION 180 MCG/ML	3	PA; SP; LA
PEGASYS SUBCUTANEOUS SYRINGE 180 MCG/0.5 ML	3	PA; SP; LA
VACCINES & MISCELLANEOUS IMMUNOLOGICALS		
ABRYSVO (PF) INTRAMUSCULAR RECON SOLN 120 MCG/0.5 ML	2	VAC
ACTHIB (PF) INTRAMUSCULAR RECON SOLN 10 MCG/0.5 ML	2	VAC
ADACEL (TDAP ADOLESN/ADULT)(PF) INTRAMUSCULAR SUSPENSION 2 LF-(2.5-5-3-5 MCG)-5LF/0.5 ML	2	VAC
ADACEL (TDAP ADOLESN/ADULT)(PF) INTRAMUSCULAR SYRINGE 2 LF-(2.5-5-3-5 MCG)-5LF/0.5 ML	2	VAC
AREXVY (PF) INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 120 MCG/0.5 ML	2	VAC

Drug Name	Tier	Requirements / Limits
BCG VACCINE, LIVE (PF) PERCUTANEOUS SUSPENSION FOR RECONSTITUTION 50 MG	2	
BEXSERO INTRAMUSCULAR SYRINGE 50-50-50-25 MCG/0.5 ML	2	VAC
BIOTHRAX INTRAMUSCULAR SUSPENSION 0.5 ML/DOSE	2	VAC
BOOSTRIX TDAP INTRAMUSCULAR SYRINGE 2.5-8-5 LF-MCG-LF/0.5ML	2	VAC
CAPVAXIVE INTRAMUSCULAR SYRINGE 0.5 ML	2	VAC
COMIRNATY 2024-25 (12Y UP)(PF) INTRAMUSCULAR SYRINGE 30 MCG/0.3 ML	2	VAC
DAPTACEL (DTAP PEDIATRIC) (PF) INTRAMUSCULAR SUSPENSION 15-10-5 LF-MCG-LF/0.5ML	2	VAC
DENGVAXIA (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION 10EXP4.5-6 CCID50/0.5 ML	2	VAC
ENGERIX-B (PF) INTRAMUSCULAR SUSPENSION 20 MCG/ML	2	VAC
ENGERIX-B (PF) INTRAMUSCULAR SYRINGE 20 MCG/ML	2	VAC
ENGERIX-B PEDIATRIC (PF) INTRAMUSCULAR SYRINGE 10 MCG/0.5 ML	2	VAC
GARDASIL 9 (PF) INTRAMUSCULAR SUSPENSION 0.5 ML	2	VAC
GARDASIL 9 (PF) INTRAMUSCULAR SYRINGE 0.5 ML	2	VAC
GRASTEK SUBLINGUAL TABLET 2,800 BAU	4	PA
HAVRIX (PF) INTRAMUSCULAR SYRINGE 1,440 ELISA UNIT/ML, 720 ELISA UNIT/0.5 ML	2	VAC
HEPLISAV-B (PF) INTRAMUSCULAR SYRINGE 20 MCG/0.5 ML	2	VAC
HIBERIX (PF) INTRAMUSCULAR RECON SOLN 10 MCG/0.5 ML	2	VAC
IMOVAX RABIES VACCINE (PF) INTRAMUSCULAR RECON SOLN 2.5 UNIT	2	VAC
INFANRIX (DTAP) (PF) INTRAMUSCULAR SYRINGE 25-58-10 LF-MCG-LF/0.5ML	2	VAC
IPOL INJECTION SUSPENSION 40-8-32 UNIT/0.5 ML	2	VAC

Drug Name	Tier	Requirements / Limits
IXCHIQ (PF) INTRAMUSCULAR RECON SOLN 1,000 TCID50/0.5 ML	4	VAC
IXIARO (PF) INTRAMUSCULAR SYRINGE 6 MCG/0.5 ML	2	VAC
JYNNEOS (PF) SUBCUTANEOUS SUSPENSION 0.5X TO 3.95X 10EXP8 UNIT/0.5	2	VAC
KINRIX (PF) INTRAMUSCULAR SYRINGE 25 LF-58 MCG-10 LF/0.5 ML	2	VAC
MENQUADFI (PF) INTRAMUSCULAR SOLUTION 10 MCG/0.5 ML	4	VAC
MENVEO A-C-Y-W-135-DIP (PF) INTRAMUSCULAR KIT 10-5 MCG/0.5 ML	2	VAC
MENVEO A-C-Y-W-135-DIP (PF) INTRAMUSCULAR SOLUTION 10-5 MCG/0.5 ML	4	VAC
M-M-R II (PF) SUBCUTANEOUS RECON SOLN 1,000-12,500 TCID50/0.5 ML	2	VAC
MRESVIA (PF) INTRAMUSCULAR SYRINGE 50 MCG/0.5 ML	2	VAC
ODACTRA SUBLINGUAL TABLET 12 SQ-HDM	4	PA
ORALAIR SUBLINGUAL TABLET 300 INDX REACTIVITY	4	PA; SP
PALFORZIA (LEVEL 0) ORAL CAPSULE, SPRINKLE 1 MG	4	PA; SP; QL (180 per 30 days)
PALFORZIA (LEVEL 1) ORAL CAPSULE, SPRINKLE 3 MG (1 MG X 3)	4	PA; SP; QL (180 per 30 days)
PALFORZIA (LEVEL 2) ORAL CAPSULE, SPRINKLE 6 MG (1 MG X 6)	4	PA; SP; QL (180 per 30 days)
PALFORZIA (LEVEL 3) ORAL CAPSULE, SPRINKLE 12 MG (1 MG X 2, 10 MG X 1)	4	PA; SP; QL (180 per 30 days)
PALFORZIA (LEVEL 4) ORAL CAPSULE, SPRINKLE 20 MG	4	PA; SP; QL (180 per 30 days)
PALFORZIA (LEVEL 5) ORAL CAPSULE, SPRINKLE 40 MG (20 MG X 2)	4	PA; SP; QL (180 per 30 days)
PALFORZIA (LEVEL 6) ORAL CAPSULE, SPRINKLE 80 MG (20 MG X 4)	4	PA; SP; QL (180 per 30 days)
PALFORZIA (LEVEL 7) ORAL CAPSULE, SPRINKLE 120 MG (20 MG X 1, 100 MG X 1)	4	PA; SP; QL (180 per 30 days)
PALFORZIA (LEVEL 8) ORAL CAPSULE, SPRINKLE 160 MG (20 MG X 3, 100 MG X1)	4	PA; SP; QL (180 per 30 days)

Drug Name	Tier	Requirements / Limits
PALFORZIA (LEVEL 9) ORAL CAPSULE, SPRINKLE 200 MG (100 MG X 2)	4	PA; SP; QL (180 per 30 days)
PALFORZIA (LEVEL 10) ORAL CAPSULE, SPRINKLE 240 MG (20 MG X 2, 100 MG X 2)	4	PA; SP; QL (180 per 30 days)
PALFORZIA INITIAL (1-3 YRS) ORAL CAPSULE, SPRINKLE 0.5/1/1.5/3 MG	4	PA; SP; QL (180 per 30 days)
PALFORZIA INITIAL (4-17 YRS) ORAL CAPSULE, SPRINKLE 0.5/1/1.5/3/6 MG	4	PA; SP; QL (180 per 30 days)
PALFORZIA LEVEL 11 MAINTENANCE ORAL POWDER IN PACKET 300 MG	4	PA; SP; QL (180 per 30 days)
PEDIARIX (PF) INTRAMUSCULAR SYRINGE 10 MCG-25LF-25 MCG-10LF/0.5 ML	2	VAC
PEDVAX HIB (PF) INTRAMUSCULAR SOLUTION 7.5 MCG/0.5 ML	2	VAC
PENBRAYA (PF) INTRAMUSCULAR KIT 5-120 MCG/0.5 ML	2	VAC
PENTACEL (PF) INTRAMUSCULAR KIT 15LF-20MCG-5LF- 62 DU/0.5 ML	2	VAC
PNEUMOVAX-23 INJECTION SYRINGE 25 MCG/0.5 ML	2	VAC
PREVNAR 20 (PF) INTRAMUSCULAR SYRINGE 0.5 ML	2	VAC
PRIORIX (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION 10EXP3.4-4.2- 3.3CCID50/0.5ML	2	VAC
PROQUAD (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION 10EXP3-4.3-3- 3.99 TCID50/0.5	2	VAC
QUADRACEL (PF) INTRAMUSCULAR SUSPENSION 15 LF-48 MCG- 5 LF UNIT/0.5ML	2	VAC
QUADRACEL (PF) INTRAMUSCULAR SYRINGE 15 LF-48 MCG- 5 LF UNIT/0.5ML	2	VAC
RABAVERT (PF) INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 2.5 UNIT	2	VAC
RAGWITEK SUBLINGUAL TABLET 12 AMB A 1 UNIT	4	PA
RECOMBIVAX HB (PF) INTRAMUSCULAR SUSPENSION 10 MCG/ML, 40 MCG/ML, 5 MCG/0.5 ML	2	VAC

Drug Name	Tier	Requirements / Limits
RECOMBIVAX HB (PF) INTRAMUSCULAR SYRINGE 10 MCG/ML, 5 MCG/0.5 ML	2	VAC
ROTARIX ORAL SUSPENSION 10EXP6 CCID50 /1.5 ML	2	VAC
ROTATEQ VACCINE ORAL SOLUTION 2 ML	2	VAC
SHINGRIX (PF) INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 50 MCG/0.5 ML	2	VAC
SPIKEVAX 2024-2025(12Y UP)(PF) INTRAMUSCULAR SYRINGE 50 MCG/0.5 ML	2	VAC
STAMARIL (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION 1,000 UNIT/0.5 ML	4	VAC
TENIVAC (PF) INTRAMUSCULAR SUSPENSION 5 LF UNIT- 2 LF UNIT/0.5ML	2	VAC
TENIVAC (PF) INTRAMUSCULAR SYRINGE 5-2 LF UNIT/0.5 ML	2	VAC
TICOVAC INTRAMUSCULAR SYRINGE 1.2 MCG/0.25 ML, 2.4 MCG/0.5 ML	4	VAC
TRUMENBA INTRAMUSCULAR SYRINGE 120 MCG/0.5 ML	2	VAC
TWINRIX (PF) INTRAMUSCULAR SYRINGE 720 ELISA UNIT- 20 MCG/ML	2	VAC
TYPHIM VI INTRAMUSCULAR SOLUTION 25 MCG/0.5 ML	2	VAC
TYPHIM VI INTRAMUSCULAR SYRINGE 25 MCG/0.5 ML	2	VAC
VAQTA (PF) INTRAMUSCULAR SUSPENSION 25 UNIT/0.5 ML, 50 UNIT/ML	2	VAC
VAQTA (PF) INTRAMUSCULAR SYRINGE 25 UNIT/0.5 ML, 50 UNIT/ML	2	VAC
VARIVAX (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION 1,350 UNIT/0.5 ML	2	VAC
VAXCHORA VACCINE ORAL SUSPENSION FOR RECONSTITUTION 4X10EXP8 TO 2X 10EXP9 CF UNIT	2	VAC
VAXELIS (PF) INTRAMUSCULAR SUSPENSION 15 UNIT-5 UNIT- 10 MCG/0.5 ML	4	VAC
VAXELIS (PF) INTRAMUSCULAR SYRINGE 15 UNIT-5 UNIT- 10 MCG/0.5 ML	4	VAC

Drug Name	Tier	Requirements / Limits
VAXNEUVANCE (PF) INTRAMUSCULAR SYRINGE 0.5 ML	4	VAC
VIMKUNYA INTRAMUSCULAR SYRINGE 40 MCG/0.8 ML	2	VAC
VIVOTIF ORAL CAPSULE, DELAYED RELEASE (DR/EC) 2 BILLION UNIT	2	VAC
YF-VAX (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION 10 EXP4.74 UNIT/0.5 ML	2	VAC

MUSCULOSKELETAL & RHEUMATOLOGY

GOUT THERAPY

<i>allopurinol oral tablet 100 mg, 300 mg</i>	1	
<i>allopurinol oral tablet 200 mg</i>	EX	
<i>colchicine oral capsule 0.6 mg</i>	1	
<i>colchicine oral tablet 0.6 mg</i>	1	
COLCRYS ORAL TABLET 0.6 MG	4	
<i>febuxostat oral tablet 40 mg, 80 mg</i>	4	
GLOPERBA ORAL SOLUTION 0.6 MG/5 ML	4	PA
MITIGARE ORAL CAPSULE 0.6 MG	4	PA
<i>probenecid oral tablet 500 mg</i>	1	
<i>probenecid-colchicine oral tablet 500-0.5 mg</i>	1	
ULORIC ORAL TABLET 40 MG, 80 MG	EX	
ZYLOPRIM ORAL TABLET 100 MG	4	PA

OSTEOPOROSIS THERAPY

ACTONEL ORAL TABLET 150 MG, 35 MG	4	
<i>alendronate oral solution 70 mg/75 ml</i>	1	
<i>alendronate oral tablet 10 mg, 35 mg, 5 mg, 70 mg</i>	1	
AELVIA ORAL TABLET, DELAYED RELEASE (DR/EC) 35 MG	4	
BINOSTO ORAL TABLET, EFFERVESCENT 70 MG	4	
BONSITY SUBCUTANEOUS PEN INJECTOR 20 MCG/DOSE (560MCG/2.24ML)	4	PA; SP
EVISTA ORAL TABLET 60 MG	4	PA; QL (30 per 30 days)
FORTEO SUBCUTANEOUS PEN INJECTOR 20 MCG/DOSE (560MCG/2.24ML)	4	PA; SP; LA; QL (1 per 30 days)
FOSAMAX ORAL TABLET 70 MG	4	

Drug Name	Tier	Requirements / Limits
FOSAMAX PLUS D ORAL TABLET 70 MG- 2, 800 UNIT, 70 MG- 5, 600 UNIT	4	
<i>ibandronate oral tablet 150 mg</i>	1	
JUBBONTI SUBCUTANEOUS SYRINGE 60 MG/ML	EX	
PROLIA SUBCUTANEOUS SYRINGE 60 MG/ML	4	PA; SP; LA
<i>raloxifene oral tablet 60 mg</i>	1	OCh; ACA PV
<i>risedronate oral tablet 150 mg, 35 mg, 5 mg</i>	1	
<i>risedronate oral tablet, delayed release (dr/ec) 35 mg</i>	1	
STOBOCLO SUBCUTANEOUS SYRINGE 60 MG/ML	EX	
TERIPARATIDE 560 MCG/2.24 ML 20 MCG/DOSE (560MCG/2.24ML)	4	PA; SP; QL (1 per 30 days)
<i>teriparatide subcutaneous pen injector 20 mcg/dose (560mcg/2.24ml)</i>	3	PA; SP; LA; QL (1 per 30 days)
TYMLOS SUBCUTANEOUS PEN INJECTOR 80 MCG (3,120 MCG/1.56 ML)	3	PA; SP; LA
OTHER RHEUMATOLOGICALS		
ABRILADA(CF) PEN SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.8 ML	EX	
ABRILADA(CF) SUBCUTANEOUS SYRINGE KIT 20 MG/0.4 ML, 40 MG/0.8 ML	EX	
ACTEMRA ACTPEN SUBCUTANEOUS PEN INJECTOR 162 MG/0.9 ML	3	PA; SP; LA
ACTEMRA SUBCUTANEOUS SYRINGE 162 MG/0.9 ML	3	PA; SP; LA
ADALIMUMAB-AACF SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.8 ML	EX	
ADALIMUMAB-AACF SUBCUTANEOUS SYRINGE KIT 40 MG/0.8 ML	EX	
ADALIMUMAB-AACF(CF) PEN CROHNS SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.8 ML	EX	
ADALIMUMAB-AACF(CF) PEN PS-UV SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.8 ML	EX	
ADALIMUMAB-AATY SUBCUTANEOUS AUTO-INJECTOR, KIT 40 MG/0.4 ML, 80 MG/0.8 ML	EX	

Drug Name	Tier	Requirements / Limits
ADALIMUMAB-AATY SUBCUTANEOUS SYRINGE KIT 20 MG/0.2 ML, 40 MG/0.4 ML	EX	
ADALIMUMAB-AATY(CF) AI CROHNS SUBCUTANEOUS AUTO-INJECTOR, KIT 80 MG/0.8 ML	EX	
ADALIMUMAB-ADAZ SUBCUTANEOUS PEN INJECTOR 40 MG/0.4 ML, 80 MG/0.8 ML	3	PA; SP; LA
ADALIMUMAB-ADAZ SUBCUTANEOUS SYRINGE 10 MG/0.1 ML, 20 MG/0.2 ML, 40 MG/0.4 ML	3	PA; SP; LA
ADALIMUMAB-ADBAM SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.4 ML, 40 MG/0.8 ML	3	PA; SP; LA
ADALIMUMAB-ADBAM SUBCUTANEOUS SYRINGE KIT 10 MG/0.2 ML, 20 MG/0.4 ML, 40 MG/0.4 ML, 40 MG/0.8 ML	3	PA; SP; LA
ADALIMUMAB-ADBAM(CF) PEN CROHNS SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.4 ML, 40 MG/0.8 ML	3	PA; SP; LA
ADALIMUMAB-ADBAM(CF) PEN PS-UV SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.4 ML, 40 MG/0.8 ML	3	PA; SP; LA
ADALIMUMAB-FKJP SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.8 ML	EX	
ADALIMUMAB-FKJP SUBCUTANEOUS SYRINGE KIT 20 MG/0.4 ML, 40 MG/0.8 ML	EX	
ADALIMUMAB-RYVK SUBCUTANEOUS AUTO-INJECTOR, KIT 40 MG/0.4 ML	3	PA; SP; LA
ADALIMUMAB-RYVK SUBCUTANEOUS SYRINGE KIT 40 MG/0.4 ML	3	PA; SP; LA
AMJEVITA(CF) AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR 40 MG/0.4 ML, 40 MG/0.8 ML, 80 MG/0.8 ML	EX	
AMJEVITA(CF) SUBCUTANEOUS SYRINGE 10 MG/0.2 ML, 20 MG/0.2 ML, 20 MG/0.4 ML, 40 MG/0.4 ML, 40 MG/0.8 ML	EX	
ARAVAL ORAL TABLET 10 MG, 20 MG	4	
AURANOFIN ORAL CAPSULE 3 MG	4	
BENLYSTA SUBCUTANEOUS AUTO-INJECTOR 200 MG/ML	3	PA; SP; LA
BENLYSTA SUBCUTANEOUS SYRINGE 200 MG/ML	3	PA; SP; LA

Drug Name	Tier	Requirements / Limits
CUPRIMINE ORAL CAPSULE 250 MG	EX	
CYLTEZO(CF) PEN CROHN'S-UC-HS SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.4 ML, 40 MG/0.8 ML	3	PA; SP; LA
CYLTEZO(CF) PEN PSORIASIS-UV SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.4 ML, 40 MG/0.8 ML	3	PA; SP; LA
CYLTEZO(CF) PEN SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.4 ML, 40 MG/0.8 ML	3	PA; SP; LA
CYLTEZO(CF) SUBCUTANEOUS SYRINGE KIT 10 MG/0.2 ML, 20 MG/0.4 ML, 40 MG/0.4 ML, 40 MG/0.8 ML	3	PA; SP; LA
DEPEN TITRATABS ORAL TABLET 250 MG	EX	
ENBREL MINI SUBCUTANEOUS CARTRIDGE 50 MG/ML (1 ML)	3	PA; SP; LA
ENBREL SUBCUTANEOUS SOLUTION 25 MG/0.5 ML	3	PA; SP; LA
ENBREL SUBCUTANEOUS SYRINGE 25 MG/0.5 ML (0.5), 50 MG/ML (1 ML)	3	PA; SP; LA
ENBREL SURECLICK SUBCUTANEOUS PEN INJECTOR 50 MG/ML (1 ML)	3	PA; SP; LA
HADLIMA PUSHTOUCH SUBCUTANEOUS AUTO-INJECTOR 40 MG/0.8 ML	EX	
HADLIMA SUBCUTANEOUS SYRINGE 40 MG/0.8 ML	EX	
HADLIMA(CF) PUSHTOUCH SUBCUTANEOUS AUTO-INJECTOR 40 MG/0.4 ML	EX	
HADLIMA(CF) SUBCUTANEOUS SYRINGE 40 MG/0.4 ML	EX	
HULIO(CF) PEN SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.8 ML	EX	
HULIO(CF) SUBCUTANEOUS SYRINGE KIT 20 MG/0.4 ML, 40 MG/0.8 ML	EX	
HUMIRA (ONLY NDCS STARTING WITH 00074) SUBCUTANEOUS SYRINGE KIT 40 MG/0.8 ML	EX	
HUMIRA PEN (ONLY NDCS STARTING WITH 00074) SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.8 ML	EX	

Drug Name	Tier	Requirements / Limits
HUMIRA(CF) (ONLY NDCS STARTING WITH 00074) SUBCUTANEOUS SYRINGE KIT 10 MG/0.1 ML, 20 MG/0.2 ML, 40 MG/0.4 ML	EX	
HUMIRA(CF) PEN (ONLY NDCS STARTING WITH 00074) SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.4 ML	EX	
HUMIRA(CF) PEN CROHNS-UC-HS (ONLY NDCS STARTING WITH 00074) SUBCUTANEOUS PEN INJECTOR KIT 80 MG/0.8 ML	EX	
HUMIRA(CF) PEN PSOR-UV-ADOL HS (ONLY NDCS STARTING WITH 00074) SUBCUTANEOUS PEN INJECTOR KIT 80 MG/0.8 ML-40 MG/0.4 ML	EX	
HYRIMOZ PEN CROHN'S-UC STARTER SUBCUTANEOUS PEN INJECTOR 80 MG/0.8 ML	EX	
HYRIMOZ PEN PSORIASIS STARTER SUBCUTANEOUS PEN INJECTOR 80MG/0.8ML(X1)- 40 MG/0.4ML(X2)	EX	
HYRIMOZ(CF) PEDI CROHN STARTER SUBCUTANEOUS SYRINGE 80 MG/0.8 ML, 80 MG/0.8 ML- 40 MG/0.4 ML	EX	
HYRIMOZ(CF) PEN SUBCUTANEOUS PEN INJECTOR 40 MG/0.4 ML, 80 MG/0.8 ML	EX	
HYRIMOZ(CF) SUBCUTANEOUS SYRINGE 10 MG/0.1 ML, 20 MG/0.2 ML, 40 MG/0.4 ML	EX	
KEVZARA SUBCUTANEOUS PEN INJECTOR 150 MG/1.14 ML, 200 MG/1.14 ML	4	PA; SP; LA
KEVZARA SUBCUTANEOUS SYRINGE 150 MG/1.14 ML, 200 MG/1.14 ML	4	PA; SP; LA
KINERET SUBCUTANEOUS SYRINGE 100 MG/0.67 ML	EX	
<i>leflunomide oral tablet 10 mg, 20 mg</i>	1	
LEQSELVI ORAL TABLET 8 MG	4	PA; SP
OLUMIANT ORAL TABLET 1 MG, 2 MG, 4 MG	4	PA; SP; LA
ORENCIA CLICKJECT SUBCUTANEOUS AUTO-INJECTOR 125 MG/ML	4	PA; SP; LA
ORENCIA SUBCUTANEOUS SYRINGE 125 MG/ML, 50 MG/0.4 ML, 87.5 MG/0.7 ML	4	PA; SP; LA
OTEZLA ORAL TABLET 20 MG, 30 MG	3	PA; SP; LA

Drug Name	Tier	Requirements / Limits
OTEZLA STARTER ORAL TABLETS, DOSE PACK 10 MG (4)- 20 MG (51), 10 MG (4)-20 MG (4)-30 MG (47)	3	PA; SP; LA
OTREXUP (PF) SUBCUTANEOUS AUTO-INJECTOR 10 MG/0.4 ML, 12.5 MG/0.4 ML, 15 MG/0.4 ML, 17.5 MG/0.4 ML, 20 MG/0.4 ML, 22.5 MG/0.4 ML, 25 MG/0.4 ML	EX	
<i>penicillamine oral capsule 250 mg</i>	1	PA
<i>penicillamine oral tablet 250 mg</i>	1	PA
RASUVO (PF) SUBCUTANEOUS AUTO-INJECTOR 10 MG/0.2 ML, 12.5 MG/0.25 ML, 15 MG/0.3 ML, 17.5 MG/0.35 ML, 20 MG/0.4 ML, 22.5 MG/0.45 ML, 25 MG/0.5 ML, 30 MG/0.6 ML, 7.5 MG/0.15 ML	2	PA; QL (4 per 30 days)
RIDAURA ORAL CAPSULE 3 MG	4	
RINVOQ LQ ORAL SOLUTION 1 MG/ML	3	PA; SP; LA
RINVOQ ORAL TABLET EXTENDED RELEASE 24 HR 15 MG, 30 MG, 45 MG	3	PA; SP; LA
SAVELLA ORAL TABLET 100 MG, 12.5 MG, 25 MG, 50 MG	4	PA
SAVELLA ORAL TABLETS, DOSE PACK 12.5 MG (5)-25 MG(8)-50 MG(42)	4	PA
SIMLANDI(CF) AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR, KIT 40 MG/0.4 ML	3	PA; SP; LA
SIMLANDI(CF) AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR, KIT 80 MG/0.8 ML	3	PA; SP
SIMLANDI(CF) SUBCUTANEOUS SYRINGE KIT 20 MG/0.2 ML, 80 MG/0.8 ML	3	PA; SP
SIMLANDI(CF) SUBCUTANEOUS SYRINGE KIT 40 MG/0.4 ML	3	PA; SP; LA
SIMPONI SUBCUTANEOUS PEN INJECTOR 100 MG/ML, 50 MG/0.5 ML	4	PA; SP; LA
SIMPONI SUBCUTANEOUS SYRINGE 100 MG/ML, 50 MG/0.5 ML	4	PA; SP; LA
TYENNE AUTOINJECTOR SUBCUTANEOUS PEN INJECTOR 162 MG/0.9 ML	3	PA; SP; LA
TYENNE SUBCUTANEOUS SYRINGE 162 MG/0.9 ML	3	PA; SP; LA
XELJANZ ORAL SOLUTION 1 MG/ML	3	PA; SP; LA

Drug Name	Tier	Requirements / Limits
XELJANZ ORAL TABLET 10 MG, 5 MG	3	PA; SP; LA
XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HR 11 MG, 22 MG	3	PA; SP; LA
YUFLYMA(CF) AI CROHN'S-UC-HS SUBCUTANEOUS AUTO-INJECTOR, KIT 80 MG/0.8 ML	EX	
YUFLYMA(CF) AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR, KIT 40 MG/0.4 ML, 80 MG/0.8 ML	EX	
YUFLYMA(CF) SUBCUTANEOUS SYRINGE KIT 20 MG/0.2 ML, 40 MG/0.4 ML	EX	
YUSIMRY(CF) PEN SUBCUTANEOUS PEN INJECTOR 40 MG/0.8 ML	EX	

OBSTETRICS & GYNECOLOGY

DIAPHRAGMS AND OTHER NON-ORAL CONTRACEPTIVES

CAYA CONTOURED VAGINAL DIAPHRAGM 65-80 MM	4	ACA PV
DUREX AVANTI BARE REAL FEEL	4	ACA PV
DUREX TROPICAL CONDOM DEVICE	4	ACA PV
FC2 FEMALE CONDOM	4	ACA PV
FEMCAP VAGINAL DEVICE 22 MM	4	ACA PV
KYLEENA INTRAUTERINE INTRAUTERINE DEVICE 17.5 MCG/24 HR (5 YRS) 19.5 MG	4	SP; ACA PV
LILETTA INTRAUTERINE INTRAUTERINE DEVICE 20.4 MCG/24 HR (8 YRS) 52 MG	4	SP; ACA PV
MIRENA INTRAUTERINE INTRAUTERINE DEVICE 21 MCG/24HR (UP TO 8 YRS) 52 MG	4	SP; ACA PV
MIUDELLA INTRAUTERINE INTRAUTERINE DEVICE 175 SQUARE MM	4	SP; ACA PV
PARAGARD T 380A INTRAUTERINE DEVICE 380 SQUARE MM	4	SP; ACA PV
SKYLA INTRAUTERINE INTRAUTERINE DEVICE 14 MCG/24 HR (3 YRS) 13.5 MG	4	SP; ACA PV
TRUSTEX-RIA NON-LUB CONDOMS DEVICE	4	ACA PV
WIDE-SEAL VAGINAL DIAPHRAGM 60 MM	4	ACA PV

ESTROGENS & PROGESTINS

ACTIVELLA ORAL TABLET 1-0.5 MG	4	
ANGELIQ ORAL TABLET 0.25-0.5 MG, 0.5-1 MG	4	

Drug Name	Tier	Requirements / Limits
BIJUVA ORAL CAPSULE 0.5-100 MG, 1-100 MG	EX	
<i>camila oral tablet 0.35 mg</i>	1	ACA PV
CLIMARA PRO TRANSDERMAL PATCH WEEKLY 0.045-0.015 MG/24 HR	EX	
CLIMARA TRANSDERMAL PATCH WEEKLY 0.025 MG/24 HR, 0.0375 MG/24 HR, 0.05 MG/24 HR, 0.06 MG/24 HR, 0.075 MG/24 HR, 0.1 MG/24 HR	4	QL (4 per 30 days)
COMBIPATCH TRANSDERMAL PATCH SEMIWEEKLY 0.05-0.14 MG/24 HR, 0.05-0.25 MG/24 HR	2	
<i>covaryx h.s. oral tablet 0.625-1.25 mg</i>	1	
<i>covaryx oral tablet 1.25-2.5 mg</i>	1	
CRINONE VAGINAL GEL 4 %	4	
<i>deblitane oral tablet 0.35 mg</i>	1	ACA PV
DELESTROGEN INTRAMUSCULAR OIL 10 MG/ML, 20 MG/ML	4	
DEPO-ESTRADIOL INTRAMUSCULAR OIL 5 MG/ML	2	
DEPO-PROVERA INTRAMUSCULAR SUSPENSION 150 MG/ML	EX	
DEPO-PROVERA INTRAMUSCULAR SYRINGE 150 MG/ML	4	ACA PV
DEPO-SUBQ PROVERA 104 SUBCUTANEOUS SYRINGE 104 MG/0.65 ML	4	ACA PV
DIVIGEL TRANSDERMAL GEL IN PACKET 0.25 MG/0.25 GRAM (0.1 %), 0.5 MG/0.5 GRAM (0.1 %), 0.75 MG/0.75 GRAM (0.1%), 1 MG/GRAM (0.1 %), 1.25 MG/1.25 GRAM (0.1 %)	4	QL (30 per 30 days)
<i>dotti transdermal patch semiweekly 0.025 mg/24 hr, 0.0375 mg/24 hr, 0.05 mg/24 hr, 0.075 mg/24 hr, 0.1 mg/24 hr</i>	1	QL (8 per 30 days)
DUAVEE ORAL TABLET 0.45-20 MG	4	
<i>eemt hs oral tablet 0.625-1.25 mg</i>	1	
<i>eemt oral tablet 1.25-2.5 mg</i>	1	
ELESTRIN TRANSDERMAL GEL IN METERED-DOSE PUMP 0.87 GRAM/ACTUATION	EX	
<i>emzahh oral tablet 0.35 mg</i>	1	ACA PV

Drug Name	Tier	Requirements / Limits
<i>errin oral tablet 0.35 mg</i>	1	ACA PV
ESTRACE ORAL TABLET 0.5 MG, 1 MG, 2 MG	4	
ESTRACE VAGINAL CREAM 0.01 % (0.1 MG/GRAM)	EX	
<i>estradiol oral tablet 0.5 mg, 1 mg, 2 mg</i>	1	
<i>estradiol transdermal gel in metered-dose pump 1.25 gram/actuation</i>	EX	
<i>estradiol transdermal gel in packet 0.25 mg/0.25 gram (0.1 %), 0.5 mg/0.5 gram (0.1 %), 0.75 mg/0.75 gram (0.1%), 1 mg/gram (0.1 %), 1.25 mg/1.25 gram (0.1 %)</i>	1	QL (30 per 30 days)
<i>estradiol transdermal patch semiweekly 0.025 mg/24 hr, 0.0375 mg/24 hr, 0.05 mg/24 hr, 0.075 mg/24 hr, 0.1 mg/24 hr</i>	1	QL (8 per 30 days)
<i>estradiol transdermal patch weekly 0.025 mg/24 hr, 0.0375 mg/24 hr, 0.05 mg/24 hr, 0.06 mg/24 hr, 0.075 mg/24 hr, 0.1 mg/24 hr</i>	1	QL (4 per 30 days)
<i>estradiol vaginal cream 0.01 % (0.1 mg/gram)</i>	1	
<i>estradiol vaginal tablet 10 mcg</i>	1	
<i>estradiol valerate intramuscular oil 10 mg/ml, 20 mg/ml, 40 mg/ml</i>	1	
<i>estradiol-norethindrone acet oral tablet 0.5-0.1 mg, 1-0.5 mg</i>	1	
ESTRATEST F.S. ORAL TABLET 1.25-2.5 MG	4	
ESTRATEST H.S. ORAL TABLET 0.625-1.25 MG	4	
ESTRING VAGINAL RING 2 MG (7.5 MCG /24 HOUR)	2	
ESTROGEL TRANSDERMAL GEL IN METERED-DOSE PUMP 1.25 GRAM/ACTUATION	EX	
<i>estrogens-methyltestosterone oral tablet 0.625-1.25 mg, 1.25-2.5 mg</i>	1	
EVAMIST TRANSDERMAL SPRAY, NON-AEROSOL 1.53 MG/SPRAY (1.7%)	4	QL (2 per 30 days)
FEMRING VAGINAL RING 0.05 MG/24 HR, 0.1 MG/24 HR	EX	
<i>fyavolv oral tablet 0.5-2.5 mg-mcg, 1-5 mg-mcg</i>	1	
<i>gallifrey oral tablet 5 mg</i>	1	

Drug Name	Tier	Requirements / Limits
<i>heather oral tablet 0.35 mg</i>	1	ACA PV
IMVEXXY MAINTENANCE PACK VAGINAL INSERT 10 MCG, 4 MCG	4	QL (8 per 30 days)
IMVEXXY STARTER PACK VAGINAL INSERT, DOSE PACK 10 MCG, 4 MCG	4	QL (18 per 365 days)
<i>incassia oral tablet 0.35 mg</i>	1	ACA PV
<i>jencycla oral tablet 0.35 mg</i>	1	ACA PV
<i>jinteli oral tablet 1-5 mg-mcg</i>	1	
<i>lyleq oral tablet 0.35 mg</i>	1	ACA PV
<i>lyllana transdermal patch semiweekly 0.025 mg/24 hr, 0.0375 mg/24 hr, 0.05 mg/24 hr, 0.075 mg/24 hr, 0.1 mg/24 hr</i>	1	QL (8 per 30 days)
<i>lyza oral tablet 0.35 mg</i>	1	ACA PV
<i>medroxyprogesterone intramuscular suspension 150 mg/ml</i>	1	ACA PV
<i>medroxyprogesterone intramuscular syringe 150 mg/ml</i>	1	ACA PV
<i>medroxyprogesterone oral tablet 10 mg, 2.5 mg, 5 mg</i>	1	
<i>meleya oral tablet 0.35 mg</i>	1	ACA PV
MENEST ORAL TABLET 0.3 MG, 0.625 MG, 1.25 MG, 2.5 MG	4	
MENOSTAR TRANSDERMAL PATCH WEEKLY 14 MCG/24 HR	4	QL (4 per 30 days)
<i>mimvey oral tablet 1-0.5 mg</i>	1	
MINIVELLE TRANSDERMAL PATCH SEMIWEEKLY 0.025 MG/24 HR, 0.0375 MG/24 HR, 0.05 MG/24 HR, 0.075 MG/24 HR, 0.1 MG/24 HR	EX	
<i>nora-be oral tablet 0.35 mg</i>	1	ACA PV
<i>norethindrone (contraceptive) oral tablet 0.35 mg</i>	1	ACA PV
<i>norethindrone acetate oral tablet 5 mg</i>	1	
<i>norethindrone ac-eth estradiol oral tablet 0.5-2.5 mg-mcg, 1-5 mg-mcg</i>	1	
OPILL ORAL TABLET 0.075 MG	2	ACA PV; QL (28 per 28 days)
PREMARIN ORAL TABLET 0.3 MG, 0.45 MG, 0.625 MG, 0.9 MG, 1.25 MG	2	
PREMARIN VAGINAL CREAM 0.625 MG/GRAM	2	

Drug Name	Tier	Requirements / Limits
PREMPHASE ORAL TABLET 0.625 MG (14)/ 0.625MG-5MG(14)	4	
PREMPRO ORAL TABLET 0.3-1.5 MG, 0.45-1.5 MG, 0.625-2.5 MG, 0.625-5 MG	4	
<i>progesterone intramuscular oil 50 mg/ml</i>	3	SP; LA
<i>progesterone micronized oral capsule 100 mg, 200 mg</i>	1	
PROMETRIUM ORAL CAPSULE 100 MG, 200 MG	4	
PROVERA ORAL TABLET 10 MG, 2.5 MG, 5 MG	4	
<i>sharobel oral tablet 0.35 mg</i>	1	ACA PV
<i>tulana oral tablet 0.35 mg</i>	1	ACA PV
VAGIFEM VAGINAL TABLET 10 MCG	EX	
VIVELLE-DOT TRANSDERMAL PATCH SEMIWEEKLY 0.025 MG/24 HR, 0.0375 MG/24 HR, 0.05 MG/24 HR, 0.075 MG/24 HR, 0.1 MG/24 HR	EX	
<i>yuvafem vaginal tablet 10 mcg</i>	1	
MISCELLANEOUS OB/GYN		
ANNOVERA VAGINAL RING 0.15-0.013 MG/24 HOUR	2	ACA PV
CERVIDIL VAGINAL INSERT, EXTENDED RELEASE 10 MG	4	
CLEOCIN VAGINAL CREAM 2 %	EX	
CLEOCIN VAGINAL SUPPOSITORY 100 MG	4	
<i>clindamycin phosphate vaginal cream 2 %</i>	1	
CLINDESSE VAGINAL CREAM, EXTENDED RELEASE 2 %	4	
<i>eluryng vaginal ring 0.12-0.015 mg/24 hr</i>	1	ACA PV
<i>enilloring vaginal ring 0.12-0.015 mg/24 hr</i>	1	ACA PV
<i>etonogestrel-ethinyl estradiol vaginal ring 0.12- 0.015 mg/24 hr</i>	1	ACA PV
<i>fem ph vaginal gel 0.9-0.025 %</i>	1	
GYNAZOLE-1 VAGINAL CREAM 2 %	4	
<i>haloette vaginal ring 0.12-0.015 mg/24 hr</i>	1	ACA PV
INTRAROSA VAGINAL INSERT 6.5 MG	4	
<i>metronidazole vaginal gel 0.75 % (37.5mg/5 gram)</i>	1	

Drug Name	Tier	Requirements / Limits
<i>miconazole-3 vaginal suppository 200 mg</i>	1	
MYFEMBREE ORAL TABLET 40-1-0.5 MG	4	PA; QL (30 per 30 days)
NEXPLANON SUBDERMAL IMPLANT 68 MG	4	SP; ACA PV
<i>norelgestromin-ethin.estradiol transdermal patch weekly 150-35 mcg/24 hr</i>	1	ACA PV
NUVARING VAGINAL RING 0.12-0.015 MG/24 HR	4	ACA PV
NUVESSA VAGINAL GEL 1.3 % (65 MG/5 GRAM)	4	PA
ORIAHNN ORAL CAPSULE, SEQUENTIAL 300-1-0.5MG (AM) /300 MG (PM)	4	PA; QL (56 per 30 days)
OSPHENA ORAL TABLET 60 MG	4	
PHEXXI VAGINAL GEL 1.8-1-0.4 %	2	ACA PV
PREPIDIL VAGINAL GEL 0.5 MG/3 G	4	
RELAGARD VAGINAL GEL 0.9-0.025 %	EX	
<i>terconazole vaginal cream 0.4 %, 0.8 %</i>	1	
<i>terconazole vaginal suppository 80 mg</i>	1	
<i>tranexamic acid oral tablet 650 mg</i>	1	
TRIMO-SAN JELLY VAGINAL GEL 0.025-0.01 %	4	
TWIRLA TRANSDERMAL PATCH WEEKLY 120-30 MCG/24 HR	4	ACA PV
<i>vandazole vaginal gel 0.75 % (37.5mg/5 gram)</i>	1	
VCF CONTRACEPTIVE VAGINAL FILM 28 %	4	ACA PV
VCF CONTRACEPTIVE VAGINAL GEL 4 %	4	ACA PV
VEOZAH ORAL TABLET 45 MG	4	PA; QL (30 per 30 days)
XACIATO VAGINAL GEL 2 %	4	PA
<i>xulane transdermal patch weekly 150-35 mcg/24 hr</i>	1	ACA PV
<i>zafemy transdermal patch weekly 150-35 mcg/24 hr</i>	1	ACA PV
ORAL CONTRACEPTIVES & RELATED AGENTS		
<i>afirmelle oral tablet 0.1-20 mg-mcg</i>	1	ACA PV
<i>after pill oral tablet 1.5 mg</i>	4	ACA PV
AFTERA ORAL TABLET 1.5 MG	4	ACA PV
<i>altavera (28) oral tablet 0.15-0.03 mg</i>	1	ACA PV
<i>alyacen 1/35 (28) oral tablet 1-35 mg-mcg</i>	1	ACA PV

Drug Name	Tier	Requirements / Limits
<i>alyacen 7/7/7 (28) oral tablet 0.5/0.75/1 mg- 35 mcg</i>	1	ACA PV
<i>amethia oral tablets, dose pack, 3 month 0.15 mg-30 mcg (84)/10 mcg (7)</i>	1	ACA PV
<i>amethyst oral tablet 90-20 mcg (28)</i>	1	ACA PV
<i>apri oral tablet 0.15-0.03 mg</i>	1	ACA PV
<i>aranelle (28) oral tablet 0.5/1/0.5-35 mg-mcg</i>	1	ACA PV
<i>ashlyna oral tablets, dose pack, 3 month 0.15 mg-30 mcg (84)/10 mcg (7)</i>	1	ACA PV
<i>aubra eq oral tablet 0.1-20 mg-mcg</i>	1	ACA PV
<i>aubra oral tablet 0.1-20 mg-mcg</i>	1	ACA PV
<i>aurovela 1.5/30 (21) oral tablet 1.5-30 mg-mcg</i>	1	ACA PV
<i>aurovela 1/20 (21) oral tablet 1-20 mg-mcg</i>	1	ACA PV
<i>aurovela 24 fe oral tablet 1 mg-20 mcg (24)/75 mg (4)</i>	1	ACA PV
<i>aurovela fe 1.5/30 (28) oral tablet 1.5 mg-30 mcg (21)/75 mg (7)</i>	1	ACA PV
<i>aurovela fe 1-20 (28) oral tablet 1 mg-20 mcg (21)/75 mg (7)</i>	1	ACA PV
<i>aviane oral tablet 0.1-20 mg-mcg</i>	1	ACA PV
<i>ayuna oral tablet 0.15-0.03 mg</i>	1	ACA PV
<i>azurette (28) oral tablet 0.15-0.02 mgx21 /0.01 mg x 5</i>	1	ACA PV
BALCOLTRA ORAL TABLET 0.1 MG-0.02 MG (21)/IRON (7)	4	ACA PV
<i>balziva (28) oral tablet 0.4-35 mg-mcg</i>	1	ACA PV
BEYAZ ORAL TABLET 3-0.02-0.451 MG (24) (4)	4	ACA PV
<i>blisovi 24 fe oral tablet 1 mg-20 mcg (24)/75 mg (4)</i>	1	ACA PV
<i>blisovi fe 1.5/30 (28) oral tablet 1.5 mg-30 mcg (21)/75 mg (7)</i>	1	ACA PV
<i>blisovi fe 1/20 (28) oral tablet 1 mg-20 mcg (21)/75 mg (7)</i>	1	ACA PV
<i>briellyn oral tablet 0.4-35 mg-mcg</i>	1	ACA PV
<i>camrese lo oral tablets, dose pack,3 month 0.1 mg-20 mcg (84)/10 mcg (7)</i>	1	ACA PV
<i>camrese oral tablets, dose pack, 3 month 0.15 mg-30 mcg (84)/10 mcg (7)</i>	1	ACA PV

Drug Name	Tier	Requirements / Limits
<i>caziant (28) oral tablet 0.1/.125/.15-25 mg-mcg</i>	1	ACA PV
<i>charlotte 24 fe oral tablet, chewable 1 mg-20 mcg (24) /75 mg (4)</i>	1	ACA PV
<i>chateal eq (28) oral tablet 0.15-0.03 mg</i>	1	ACA PV
<i>cryselles (28) oral tablet 0.3-30 mg-mcg</i>	1	ACA PV
<i>cyred eq oral tablet 0.15-0.03 mg</i>	1	ACA PV
<i>cyred oral tablet 0.15-0.03 mg</i>	1	ACA PV
<i>dasetta 1/35 (28) oral tablet 1-35 mg-mcg</i>	1	ACA PV
<i>dasetta 7/7/7 (28) oral tablet 0.5/0.75/1 mg- 35 mcg</i>	1	ACA PV
<i>daysee oral tablets, dose pack, 3 month 0.15 mg-30 mcg (84)/10 mcg (7)</i>	1	ACA PV
<i>desog-e.estradiol/e.estradiol oral tablet 0.15-0.02 mgx21 /0.01 mg x 5</i>	1	ACA PV
<i>dolishale oral tablet 90-20 mcg (28)</i>	1	ACA PV
<i>drospirenone-e.estradiol-lm.fa oral tablet 3-0.02-0.451 mg (24) (4), 3-0.03-0.451 mg (21) (7)</i>	4	ACA PV
<i>drospirenone-ethinyl estradiol oral tablet 3-0.02 mg, 3-0.03 mg</i>	1	ACA PV
<i>econtra ez oral tablet 1.5 mg</i>	1	ACA PV
<i>econtra one-step oral tablet 1.5 mg</i>	1	ACA PV
<i>elinest oral tablet 0.3-30 mg-mcg</i>	1	ACA PV
ELLA ORAL TABLET 30 MG	2	ACA PV
<i>enpresse oral tablet 50-30 (6)/75-40 (5)/125-30(10)</i>	1	ACA PV
<i>enskyce oral tablet 0.15-0.03 mg</i>	1	ACA PV
<i>estarylla oral tablet 0.25-0.035 mg</i>	1	ACA PV
<i>ethynodiol diac-eth estradiol oral tablet 1-35 mg-mcg, 1-50 mg-mcg</i>	1	ACA PV
<i>falmina (28) oral tablet 0.1-20 mg-mcg</i>	1	ACA PV
<i>feirza oral tablet 1 mg-20 mcg (21)/75 mg (7), 1.5 mg-30 mcg (21)/75 mg (7)</i>	1	ACA PV
FEMLYV ORAL TABLET, DISINTEGRATING 1 MG- 20 MCG	4	ACA PV
<i>finzala oral tablet, chewable 1 mg-20 mcg(24) /75 mg (4)</i>	1	ACA PV
<i>galbriela oral tablet, chewable 0.8mg-25mcg(24) and 75 mg (4)</i>	1	ACA PV

Drug Name	Tier	Requirements / Limits
<i>gemmily oral capsule 1 mg-20 mcg (24)/75 mg (4)</i>	4	ACA PV
<i>hailey 24 fe oral tablet 1 mg-20 mcg (24)/75 mg (4)</i>	1	ACA PV
<i>hailey fe 1.5/30 (28) oral tablet 1.5 mg-30 mcg (21)/75 mg (7)</i>	1	ACA PV
<i>hailey fe 1/20 (28) oral tablet 1 mg-20 mcg (21)/75 mg (7)</i>	1	ACA PV
<i>hailey oral tablet 1.5-30 mg-mcg</i>	1	ACA PV
<i>iclevia oral tablets, dose pack, 3 month 0.15 mg-30 mcg (91)</i>	1	ACA PV
<i>isibloom oral tablet 0.15-0.03 mg</i>	1	ACA PV
<i>jaimiess oral tablets, dose pack, 3 month 0.15 mg-30 mcg (84)/10 mcg (7)</i>	1	ACA PV
<i>jasmiel (28) oral tablet 3-0.02 mg</i>	1	ACA PV
<i>jolessa oral tablets, dose pack, 3 month 0.15 mg-30 mcg (91)</i>	1	ACA PV
<i>joyeaux oral tablet 0.1 mg-0.02 mg (21)/iron (7)</i>	1	ACA PV
<i>juleber oral tablet 0.15-0.03 mg</i>	1	ACA PV
<i>junel 1.5/30 (21) oral tablet 1.5-30 mg-mcg</i>	1	ACA PV
<i>junel 1/20 (21) oral tablet 1-20 mg-mcg</i>	1	ACA PV
<i>junel fe 1.5/30 (28) oral tablet 1.5 mg-30 mcg (21)/75 mg (7)</i>	1	ACA PV
<i>junel fe 1/20 (28) oral tablet 1 mg-20 mcg (21)/75 mg (7)</i>	1	ACA PV
<i>junel fe 24 oral tablet 1 mg-20 mcg (24)/75 mg (4)</i>	1	ACA PV
<i>kaitlib fe oral tablet, chewable 0.8mg-25mcg(24) and 75 mg (4)</i>	1	ACA PV
<i>kalliga oral tablet 0.15-0.03 mg</i>	1	ACA PV
<i>kariva (28) oral tablet 0.15-0.02 mgx21 /0.01 mg x 5</i>	1	ACA PV
<i>kelnor 1/35 (28) oral tablet 1-35 mg-mcg</i>	1	ACA PV
<i>kelnor 1/50 (28) oral tablet 1-50 mg-mcg</i>	1	ACA PV
<i>kurvelo (28) oral tablet 0.15-0.03 mg</i>	1	ACA PV
<i>l norgest/e.estradiol-e.estradiol oral tablets, dose pack,3 month 0.1 mg-20 mcg (84)/10 mcg (7)</i>	1	ACA PV
<i>larin 1.5/30 (21) oral tablet 1.5-30 mg-mcg</i>	1	ACA PV
<i>larin 1/20 (21) oral tablet 1-20 mg-mcg</i>	1	ACA PV
<i>larin 24 fe oral tablet 1 mg-20 mcg (24)/75 mg (4)</i>	1	ACA PV

Drug Name	Tier	Requirements / Limits
<i>larin fe 1.5/30 (28) oral tablet 1.5 mg-30 mcg (21)/75 mg (7)</i>	1	ACA PV
<i>larin fe 1/20 (28) oral tablet 1 mg-20 mcg (21)/75 mg (7)</i>	1	ACA PV
<i>leena 28 oral tablet 0.5/1/0.5-35 mg-mcg</i>	1	ACA PV
<i>lessina oral tablet 0.1-20 mg-mcg</i>	1	ACA PV
<i>levonest (28) oral tablet 50-30 (6)/75-40 (5)/125-30(10)</i>	1	ACA PV
<i>levonorgest-eth.estradiol-iron oral tablet 0.1 mg-0.02 mg (21)/iron (7)</i>	1	ACA PV
<i>levonorgestrel oral tablet 1.5 mg</i>	1	ACA PV
<i>levonorgestrel-ethinyl estrad oral tablet 0.1-20 mg-mcg, 0.15-0.03 mg, 90-20 mcg (28)</i>	1	ACA PV
<i>levonorgestrel-ethinyl estrad oral tablets, dose pack, 3 month 0.15 mg-30 mcg (91)</i>	1	ACA PV
<i>levonorg-eth estrad triphasic oral tablet 50-30 (6)/75-40 (5)/125-30 (10)</i>	1	ACA PV
<i>levora-28 oral tablet 0.15-0.03 mg</i>	1	ACA PV
LO LOESTRIN FE ORAL TABLET 1 MG-10 MCG (24)/10 MCG (2)	4	ACA PV
LOESTRIN 1.5/30 (21) ORAL TABLET 1.5-30 MG-MCG	4	ACA PV
LOESTRIN 1/20 (21) ORAL TABLET 1-20 MG-MCG	4	ACA PV
LOESTRIN FE 1.5/30 (28-DAY) ORAL TABLET 1.5 MG-30 MCG (21)/75 MG (7)	4	ACA PV
LOESTRIN FE 1/20 (28-DAY) ORAL TABLET 1 MG-20 MCG (21)/75 MG (7)	4	ACA PV
<i>lojaimiess oral tablets, dose pack,3 month 0.1 mg-20 mcg (84)/10 mcg (7)</i>	1	ACA PV
<i>loryna (28) oral tablet 3-0.02 mg</i>	1	ACA PV
<i>low-ogestrel (28) oral tablet 0.3-30 mg-mcg</i>	1	ACA PV
<i>lo-zumandimine (28) oral tablet 3-0.02 mg</i>	1	ACA PV
<i>lutra (28) oral tablet 0.1-20 mg-mcg</i>	1	ACA PV
<i>marlissa (28) oral tablet 0.15-0.03 mg</i>	1	ACA PV
<i>merzee oral capsule 1 mg-20 mcg (24)/75 mg (4)</i>	1	ACA PV
<i>mibelas 24 fe oral tablet, chewable 1 mg-20 mcg(24) /75 mg (4)</i>	1	ACA PV
<i>microgestin 1.5/30 (21) oral tablet 1.5-30 mg-mcg</i>	1	ACA PV

Drug Name	Tier	Requirements / Limits
<i>microgestin 1/20 (21) oral tablet 1-20 mg-mcg</i>	1	ACA PV
<i>microgestin fe 1.5/30 (28) oral tablet 1.5 mg-30 mcg (21)/75 mg (7)</i>	1	ACA PV
<i>microgestin fe 1/20 (28) oral tablet 1 mg-20 mcg (21)/75 mg (7)</i>	1	ACA PV
<i>mili oral tablet 0.25-0.035 mg</i>	1	ACA PV
<i>minzoya oral tablet 0.1 mg-0.02 mg (21)/iron (7)</i>	1	ACA PV
<i>mono-linyah oral tablet 0.25-0.035 mg</i>	1	ACA PV
<i>my choice oral tablet 1.5 mg</i>	4	ACA PV
<i>my way oral tablet 1.5 mg</i>	1	ACA PV
NATAZIA ORAL TABLET 3 MG/2 MG-2 MG/ 2 MG-3 MG/1 MG	4	ACA PV
<i>necon 0.5/35 (28) oral tablet 0.5-35 mg-mcg</i>	1	ACA PV
<i>new day oral tablet 1.5 mg</i>	1	ACA PV
NEXTSTELLIS ORAL TABLET 3 MG- 14.2 MG (28)	2	ACA PV
<i>nikki (28) oral tablet 3-0.02 mg</i>	1	ACA PV
<i>noreth-ethinyl estradiol-iron oral tablet, chewable 0.8mg-25mcg(24) and 75 mg (4)</i>	1	ACA PV
<i>norethindrone ac-eth estradiol oral tablet 1-20 mg-mcg, 1.5-30 mg-mcg</i>	1	ACA PV
<i>norethindrone-e.estradiol-iron oral capsule 1 mg-20 mcg (24)/75 mg (4)</i>	4	ACA PV
<i>norethindrone-e.estradiol-iron oral tablet 1.5 mg-30 mcg (21)/75 mg (7)</i>	1	ACA PV
<i>norethindrone-e.estradiol-iron oral tablet, chewable 1 mg-20 mcg (24) /75 mg (4)</i>	1	ACA PV
<i>norgestimate-ethinyl estradiol oral tablet 0.18/0.215/0.25 mg-0.025 mg, 0.18/0.215/0.25 mg-0.035mg (28), 0.25-0.035 mg</i>	1	ACA PV
<i>nortrel 0.5/35 (28) oral tablet 0.5-35 mg-mcg</i>	1	ACA PV
<i>nortrel 1/35 oral tablet 1-35 mg-mcg (21)</i>	1	ACA PV
<i>nortrel 1/35 (28) oral tablet 1-35 mg-mcg</i>	1	ACA PV
<i>nortrel 7/7/7 (28) oral tablet 0.5/0.75/1 mg- 35 mcg</i>	1	ACA PV
<i>nylia 1/35 (28) oral tablet 1-35 mg-mcg</i>	1	ACA PV
<i>nylia 7/7/7 (28) oral tablet 0.5/0.75/1 mg- 35 mcg</i>	1	ACA PV
<i>ocella oral tablet 3-0.03 mg</i>	1	ACA PV

Drug Name	Tier	Requirements / Limits
<i>opcicon one-step oral tablet 1.5 mg</i>	4	ACA PV
<i>option-2 oral tablet 1.5 mg</i>	1	ACA PV
<i>philith oral tablet 0.4-35 mg-mcg</i>	1	ACA PV
<i>pimtrea (28) oral tablet 0.15-0.02 mgx21 /0.01 mg x 5</i>	1	ACA PV
PLAN B ONE-STEP ORAL TABLET 1.5 MG	4	ACA PV
<i>portia 28 oral tablet 0.15-0.03 mg</i>	1	ACA PV
<i>reclipsen (28) oral tablet 0.15-0.03 mg</i>	1	ACA PV
<i>rivelsa oral tablets, dose pack, 3 month 0.15 mg-20 mcg/ 0.15 mg-25 mcg</i>	1	ACA PV
<i>rosyrah oral tablets, dose pack,3 month 0.15 mg-20 mcg/ 0.15 mg-25 mcg</i>	1	ACA PV
SAFYRAL ORAL TABLET 3-0.03-0.451 MG (21) (7)	4	ACA PV
<i>setlakin oral tablets, dose pack, 3 month 0.15 mg-30 mcg (91)</i>	1	ACA PV
<i>simliya (28) oral tablet 0.15-0.02 mgx21 /0.01 mg x 5</i>	1	ACA PV
<i>simpesse oral tablets, dose pack, 3 month 0.15 mg-30 mcg (84)/10 mcg (7)</i>	1	ACA PV
SLYND ORAL TABLET 4 MG (28)	2	ACA PV
<i>sprintec (28) oral tablet 0.25-0.035 mg</i>	1	ACA PV
<i>sronyx oral tablet 0.1-20 mg-mcg</i>	1	ACA PV
<i>syeda oral tablet 3-0.03 mg</i>	1	ACA PV
TAKE ACTION ORAL TABLET 1.5 MG	4	ACA PV
<i>tarina 24 fe oral tablet 1 mg-20 mcg (24)/75 mg (4)</i>	1	ACA PV
<i>tarina fe 1/20 (28) oral tablet 1 mg-20 mcg (21)/75 mg (7)</i>	1	ACA PV
TAYTULLA ORAL CAPSULE 1 MG-20 MCG (24)/75 MG (4)	4	ACA PV
<i>tilia fe oral tablet 1-20 (5)/1-30 (7) /1mg-35mcg (9)</i>	1	ACA PV
<i>tri-estarylla oral tablet 0.18/0.215/0.25 mg-0.035mg (28)</i>	1	ACA PV
<i>tri-legest fe oral tablet 1-20 (5)/1-30 (7) /1mg-35mcg (9)</i>	1	ACA PV
<i>tri-linyah oral tablet 0.18/0.215/0.25 mg-0.035mg (28)</i>	1	ACA PV

Drug Name	Tier	Requirements / Limits
<i>tri-lo-estarylla oral tablet 0.18/0.215/0.25 mg-0.025 mg</i>	1	ACA PV
<i>tri-lo-marzia oral tablet 0.18/0.215/0.25 mg-0.025 mg</i>	1	ACA PV
<i>tri-lo-mili oral tablet 0.18/0.215/0.25 mg-0.025 mg</i>	1	ACA PV
<i>tri-lo-sprintec oral tablet 0.18/0.215/0.25 mg-0.025 mg</i>	1	ACA PV
<i>tri-mili oral tablet 0.18/0.215/0.25 mg-0.035mg (28)</i>	1	ACA PV
<i>tri-sprintec (28) oral tablet 0.18/0.215/0.25 mg-0.035mg (28)</i>	1	ACA PV
<i>tri-vylibra lo oral tablet 0.18/0.215/0.25 mg-0.025 mg</i>	1	ACA PV
<i>tri-vylibra oral tablet 0.18/0.215/0.25 mg-0.035mg (28)</i>	1	ACA PV
<i>turqoz (28) oral tablet 0.3-30 mg-mcg</i>	1	ACA PV
TYBLUME ORAL TABLET, CHEWABLE 0.1 MG- 20 MCG	2	ACA PV
<i>valtya oral tablet 1-50 mg-mcg</i>	1	ACA PV
<i>velivet triphasic regimen (28) oral tablet 0.1/.125/.15-25 mg-mcg</i>	1	ACA PV
<i>vestura (28) oral tablet 3-0.02 mg</i>	1	ACA PV
<i>vienva oral tablet 0.1-20 mg-mcg</i>	1	ACA PV
<i>viorele (28) oral tablet 0.15-0.02 mgx21 /0.01 mg x 5</i>	1	ACA PV
<i>volnea (28) oral tablet 0.15-0.02 mgx21 /0.01 mg x 5</i>	1	ACA PV
<i>vyfemla (28) oral tablet 0.4-35 mg-mcg</i>	1	ACA PV
<i>vylibra oral tablet 0.25-0.035 mg</i>	1	ACA PV
<i>wera (28) oral tablet 0.5-35 mg-mcg</i>	1	ACA PV
<i>wymzya fe oral tablet, chewable 0.4mg-35mcg(21) and 75 mg (7)</i>	1	ACA PV
<i>xarah fe oral tablet 1-20(5)/1-30(7) /1mg-35mcg (9)</i>	1	ACA PV
<i>xelria fe oral tablet, chewable 0.4mg-35mcg(21) and 75 mg (7)</i>	1	ACA PV
YASMIN (28) ORAL TABLET 3-0.03 MG	4	ACA PV
YAZ (28) ORAL TABLET 3-0.02 MG	4	ACA PV
<i>zarah oral tablet 3-0.03 mg</i>	1	ACA PV

Drug Name	Tier	Requirements / Limits
<i>zovia 1-35 (28) oral tablet 1-35 mg-mcg</i>	1	ACA PV
<i>zumandimine (28) oral tablet 3-0.03 mg</i>	1	ACA PV
OXYTOCICS		
<i>methylergonovine oral tablet 0.2 mg</i>	1	
OPHTHALMOLOGY		
ANTIBIOTICS		
AZASITE OPHTHALMIC (EYE) DROPS 1 %	4	
<i>bacitracin ophthalmic (eye) ointment 500 unit/gram</i>	1	
<i>bacitracin-polymyxin b ophthalmic (eye) ointment 500-10,000 unit/gram</i>	1	
BESIVANCE OPHTHALMIC (EYE) DROPS, SUSPENSION 0.6 %	4	
BETADINE PREP OPHTHALMIC (EYE) SOLUTION 5 %	2	
CILOXAN OPHTHALMIC (EYE) OINTMENT 0.3 %	EX	
<i>ciprofloxacin hcl ophthalmic (eye) drops 0.3 %</i>	1	
<i>erythromycin ophthalmic (eye) ointment 5 mg/gram (0.5 %)</i>	1	
<i>gatifloxacin ophthalmic (eye) drops 0.5 %</i>	1	
<i>gentamicin ophthalmic (eye) drops 0.3 %</i>	1	
<i>levofloxacin ophthalmic (eye) drops 0.5 %, 1.5 %</i>	1	
<i>moxifloxacin ophthalmic (eye) drops 0.5 %</i>	1	
<i>moxifloxacin ophthalmic (eye) drops, viscous 0.5 %</i>	4	
NATACYN OPHTHALMIC (EYE) DROPS, SUSPENSION 5 %	4	
<i>neomycin-bacitracin-polymyxin ophthalmic (eye) ointment 3.5-400-10,000 mg-unit-unit/g</i>	1	
<i>neomycin-polymyxin-gramicidin ophthalmic (eye) drops 1.75 mg-10,000 unit-0.025mg/ml</i>	1	
<i>neo-polycin ophthalmic (eye) ointment 3.5-400-10,000 mg-unit-unit/g</i>	1	
OCUFLOX OPHTHALMIC (EYE) DROPS 0.3 %	EX	
<i>ofloxacin ophthalmic (eye) drops 0.3 %</i>	1	
<i>polycin ophthalmic (eye) ointment 500-10,000 unit/gram</i>	1	

Drug Name	Tier	Requirements / Limits
<i>polymyxin b sulf-trimethoprim ophthalmic (eye) drops 10,000 unit- 1 mg/ml</i>	1	
<i>povidone-iodine ophthalmic (eye) solution 5 %</i>	1	
<i>tobramycin ophthalmic (eye) drops 0.3 %</i>	1	
TOBREX OPHTHALMIC (EYE) OINTMENT 0.3 %	4	
VIGAMOX OPHTHALMIC (EYE) DROPS 0.5 %	EX	
ANTIVIRALS		
<i>trifluridine ophthalmic (eye) drops 1 %</i>	1	
ZIRGAN OPHTHALMIC (EYE) GEL 0.15 %	4	
BETA-BLOCKERS		
<i>betaxolol ophthalmic (eye) drops 0.5 %</i>	1	
BETIMOL OPHTHALMIC (EYE) DROPS 0.5 %	EX	
BETOPTIC S OPHTHALMIC (EYE) DROPS, SUSPENSION 0.25 %	4	PA
<i>carteolol ophthalmic (eye) drops 1 %</i>	1	
ISTALOL OPHTHALMIC (EYE) DROPS, ONCE DAILY 0.5 %	EX	
<i>levobunolol ophthalmic (eye) drops 0.5 %</i>	1	
<i>timolol maleate (pf) ophthalmic (eye) dropperette 0.25 %, 0.5 %</i>	4	
<i>timolol maleate ophthalmic (eye) drops 0.25 %, 0.5 %</i>	1	
<i>timolol maleate ophthalmic (eye) drops, once daily 0.5 %</i>	1	
<i>timolol maleate ophthalmic (eye) gel forming solution 0.25 %, 0.5 %</i>	1	
<i>timolol ophthalmic (eye) drops 0.5 %</i>	4	
TIMOPTIC OCUDOSE (PF) OPHTHALMIC (EYE) DROPPERETTE 0.25 %, 0.5 %	EX	
CHOLINESTERASE INHIBITOR MIOTICS		
PHOSPHOLINE IODIDE OPHTHALMIC (EYE) DROPS 0.125 %	3	SP
CYCLOPLEGIC MYDRIATICS		
<i>atropine ophthalmic (eye) drops 1 %</i>	1	
ATROPINE SULFATE (PF) OPHTHALMIC (EYE) DROPPERETTE 1 %	EX	

Drug Name	Tier	Requirements / Limits
CYCLOGYL OPHTHALMIC (EYE) DROPS 0.5 % , 2 %	2	
CYCLOGYL OPHTHALMIC (EYE) DROPS 1 %	EX	
<i>cyclopentolate ophthalmic (eye) drops 1 %</i>	1	
<i>homatropaire ophthalmic (eye) drops 5 %</i>	1	
MYDRIACYL OPHTHALMIC (EYE) DROPS 1 %	EX	
<i>tropicamide ophthalmic (eye) drops 0.5 % , 1 %</i>	1	
DIRECT ACTING MIOTICS		
<i>pilocarpine hcl ophthalmic (eye) drops 1 % , 2 % , 4 %</i>	1	
QLOSI OPHTHALMIC (EYE) DROPPERETTE 0.4 %	4	PA
VUITY OPHTHALMIC (EYE) DROPS 1.25 %	4	PA
MISCELLANEOUS OPHTHALMOLOGICS		
AKTEN (PF) OPHTHALMIC (EYE) GEL 3.5 %	4	
ALCAINE OPHTHALMIC (EYE) DROPS 0.5 %	EX	
<i>altacaine ophthalmic (eye) drops 0.5 %</i>	1	
ALTAFLUOR BENOX OPHTHALMIC (EYE) DROPS 0.25-0.4 %	EX	
<i>azelastine ophthalmic (eye) drops 0.05 %</i>	1	
<i>bepotastine besilate ophthalmic (eye) drops 1.5 %</i>	4	
BEPREVE OPHTHALMIC (EYE) DROPS 1.5 %	EX	
CEQUA OPHTHALMIC (EYE) DROPPERETTE 0.09 %	4	PA
<i>cromolyn ophthalmic (eye) drops 4 %</i>	1	
<i>cyclosporine ophthalmic (eye) dropperette 0.05 %</i>	1	
CYSTADROPS OPHTHALMIC (EYE) DROPS 0.37 %	4	PA; SP
CYSTARAN OPHTHALMIC (EYE) DROPS 0.44 %	4	PA; SP
<i>epinastine ophthalmic (eye) drops 0.05 %</i>	1	
FLUORESCHEIN-BENOXINATE OPHTHALMIC (EYE) DROPS 0.3-0.4 %	4	
<i>fluorescein-proparacaine ophthalmic (eye) drops 0.25-0.5 %</i>	1	
MIEBO (PF) OPHTHALMIC (EYE) DROPS 100 %	4	PA

Drug Name	Tier	Requirements / Limits
<i>olopatadine ophthalmic (eye) drops 0.1 %, 0.2 %</i>	1	
OXERVATE OPHTHALMIC (EYE) DROPS 0.002 %	4	PA; SP; LA
PHOTREXA CROSS-LINKING KIT OPHTHALMIC (EYE) COMBO, DROPS AND DROPS VISCOUS 0.146 % -0.146 %	4	
PREDNISOLONE ACETATE-BROMFENAC OPHTHALMIC (EYE) DROPS, SUSPENSION 1-0.075 %	4	
PREDNISOLONE ACETATE-NEPAFENAC OPHTHALMIC (EYE) DROPS, SUSPENSION 1-0.1 %	4	
<i>proparacaine ophthalmic (eye) drops 0.5 %</i>	1	
RESTASIS MULTIDOSE OPHTHALMIC (EYE) DROPS 0.05 %	4	PA
RESTASIS OPHTHALMIC (EYE) DROPPERETTE 0.05 %	4	PA
TETRACAINE HCL (PF) OPHTHALMIC (EYE) DROPS 0.5 %	4	
<i>tetracaine hcl ophthalmic (eye) drops 0.5 %</i>	1	
TYRVAYA NASAL SPRAY, METERED, NON-AEROSOL 0.03 MG/SPRAY	4	PA
VERKAZIA OPHTHALMIC (EYE) DROPPERETTE 0.1 %	4	PA
VEVYE OPHTHALMIC (EYE) DROPS 0.1 %	4	PA
XDEMVIY OPHTHALMIC (EYE) DROPS 0.25 %	4	PA; SP
XIIDRA OPHTHALMIC (EYE) DROPPERETTE 5 %	4	PA
ZERVIATE OPHTHALMIC (EYE) DROPPERETTE 0.24 %	EX	
NON-STEROIDAL ANTI-INFLAMMATORY AGENTS		
ACULAR LS OPHTHALMIC (EYE) DROPS 0.4 %	EX	
ACULAR OPHTHALMIC (EYE) DROPS 0.5 %	EX	
ACUVAIL (PF) OPHTHALMIC (EYE) DROPPERETTE 0.45 %	EX	
<i>bromfenac ophthalmic (eye) drops 0.07 %, 0.075 %</i>	4	
<i>bromfenac ophthalmic (eye) drops 0.09 %</i>	1	

Drug Name	Tier	Requirements / Limits
BROMSITE OPHTHALMIC (EYE) DROPS 0.075 %	EX	
<i>diclofenac sodium ophthalmic (eye) drops 0.1 %</i>	1	
<i>flurbiprofen sodium ophthalmic (eye) drops 0.03 %</i>	1	
ILEVRO OPHTHALMIC (EYE) DROPS, SUSPENSION 0.3 %	4	
<i>ketorolac ophthalmic (eye) drops 0.4 %, 0.5 %</i>	1	
NEVANAC OPHTHALMIC (EYE) DROPS, SUSPENSION 0.1 %	EX	
PROLENSA OPHTHALMIC (EYE) DROPS 0.07 %	4	
ORAL DRUGS FOR GLAUCOMA		
<i>acetazolamide oral capsule, extended release 500 mg</i>	1	
<i>acetazolamide oral tablet 125 mg, 250 mg</i>	1	
<i>methazolamide oral tablet 25 mg, 50 mg</i>	4	
OTHER GLAUCOMA DRUGS		
AZOPT OPHTHALMIC (EYE) DROPS, SUSPENSION 1 %	EX	
<i>bimatoprost ophthalmic (eye) drops 0.03 %</i>	1	
<i>brimonidine-timolol ophthalmic (eye) drops 0.2- 0.5 %</i>	4	
<i>brinzolamide ophthalmic (eye) drops, suspension 1 %</i>	4	
COMBIGAN OPHTHALMIC (EYE) DROPS 0.2- 0.5 %	4	
COSOPT (PF) OPHTHALMIC (EYE) DROPPERETTE 2-0.5 %	4	
COSOPT OPHTHALMIC (EYE) DROPS 22.3- 6.8 MG/ML	EX	
DORZOLAMIDE (PF) OPHTHALMIC (EYE) DROPS 2 %	4	
<i>dorzolamide ophthalmic (eye) drops 2 %</i>	1	
<i>dorzolamide-timolol (pf) ophthalmic (eye) dropperette 2-0.5 %</i>	1	
<i>dorzolamide-timolol ophthalmic (eye) drops 22.3- 6.8 mg/ml</i>	1	

Drug Name	Tier	Requirements / Limits
IYUZEH (PF) OPHTHALMIC (EYE) DROPPERETTE 0.005 %	4	PA
<i>latanoprost ophthalmic (eye) drops 0.005 %</i>	1	
LUMIGAN OPHTHALMIC (EYE) DROPS 0.01 %	4	PA
RHOPRESSA OPHTHALMIC (EYE) DROPS 0.02 %	4	PA
ROCKLATAN OPHTHALMIC (EYE) DROPS 0.02-0.005 %	4	PA
SIMBRINZA OPHTHALMIC (EYE) DROPS, SUSPENSION 1-0.2 %	4	
<i>tafluprost (pf) ophthalmic (eye) dropperette 0.0015 %</i>	EX	
TRAVATAN Z OPHTHALMIC (EYE) DROPS 0.004 %	EX	
<i>travoprost ophthalmic (eye) drops 0.004 %</i>	1	
VYZULTA OPHTHALMIC (EYE) DROPS 0.024 %	EX	
XALATAN OPHTHALMIC (EYE) DROPS 0.005 %	EX	
XELPROS OPHTHALMIC (EYE) DROPS, EMULSION 0.005 %	EX	
ZIOPTAN (PF) OPHTHALMIC (EYE) DROPPERETTE 0.0015 %	EX	
STEROID-ANTIBIOTIC COMBINATIONS		
MAXITROL OPHTHALMIC (EYE) DROPS, SUSPENSION 3.5MG/ML-10,000 UNIT/ML-0.1 %	EX	
MAXITROL OPHTHALMIC (EYE) OINTMENT 3.5 MG/G-10,000 UNIT/G-0.1 %	EX	
<i>neomycin-bacitracin-poly-hc ophthalmic (eye) ointment 3.5-400-10,000 mg-unit/g-1%</i>	1	
<i>neomycin-polymyxin b-dexameth ophthalmic (eye) drops, suspension 3.5mg/ml-10,000 unit/ml-0.1 %</i>	1	
<i>neomycin-polymyxin b-dexameth ophthalmic (eye) ointment 3.5 mg/g-10,000 unit/g-0.1 %</i>	1	
<i>neomycin-polymyxin-hc ophthalmic (eye) drops, suspension 3.5-10,000-10 mg-unit-mg/ml</i>	1	
<i>neo-polycin hc ophthalmic (eye) ointment 3.5-400-10,000 mg-unit/g-1%</i>	1	

Drug Name	Tier	Requirements / Limits
TOBRADEX OPHTHALMIC (EYE) OINTMENT 0.3-0.1 %	4	
TOBRADEX ST OPHTHALMIC (EYE) DROPS, SUSPENSION 0.3-0.05 %	4	ST
<i>tobramycin-dexamethasone ophthalmic (eye) drops, suspension 0.3-0.1 %</i>	1	
ZYLET OPHTHALMIC (EYE) DROPS, SUSPENSION 0.3-0.5 %	4	PA
STERIODS		
ALREX OPHTHALMIC (EYE) DROPS, SUSPENSION 0.2 %	EX	
CLOBETASOL OPHTHALMIC (EYE) DROPS, SUSPENSION 0.05 %	EX	
<i>dexamethasone sodium phosphate ophthalmic (eye) drops 0.1 %</i>	1	
DEXTENZA INTRACANALICULAR INSERT 0.4 MG	4	
<i>difluprednate ophthalmic (eye) drops 0.05 %</i>	4	
DUREZOL OPHTHALMIC (EYE) DROPS 0.05 %	EX	
EYSUVIS OPHTHALMIC (EYE) DROPS, SUSPENSION 0.25 %	4	PA
FLAREX OPHTHALMIC (EYE) DROPS, SUSPENSION 0.1 %	EX	
<i>fluorometholone ophthalmic (eye) drops, suspension 0.1 %</i>	1	
FML FORTE OPHTHALMIC (EYE) DROPS, SUSPENSION 0.25 %	EX	
FML LIQUIFILM OPHTHALMIC (EYE) DROPS, SUSPENSION 0.1 %	EX	
INVELTYS OPHTHALMIC (EYE) DROPS, SUSPENSION 1 %	4	ST
LOTEMAX OPHTHALMIC (EYE) DROPS, GEL 0.5 %	4	ST
LOTEMAX OPHTHALMIC (EYE) OINTMENT 0.5 %	4	ST
LOTEMAX SM OPHTHALMIC (EYE) DROPS, GEL 0.38 %	4	ST
<i>loteprednol etabonate ophthalmic (eye) drops, gel 0.5 %</i>	4	

Drug Name	Tier	Requirements / Limits
<i>loteprednol etabonate ophthalmic (eye) drops, suspension 0.2 %</i>	EX	
<i>loteprednol etabonate ophthalmic (eye) drops, suspension 0.5 %</i>	4	
MAXIDEX OPHTHALMIC (EYE) DROPS, SUSPENSION 0.1 %	EX	
PRED FORTE OPHTHALMIC (EYE) DROPS, SUSPENSION 1 %	EX	
PRED MILD OPHTHALMIC (EYE) DROPS, SUSPENSION 0.12 %	EX	
PREDNISOLONE ACETATE (PF) OPHTHALMIC (EYE) DROPS, SUSPENSION 1 %	4	
<i>prednisolone acetate ophthalmic (eye) drops, suspension 1 %</i>	1	
<i>prednisolone sodium phosphate ophthalmic (eye) drops 1 %</i>	1	
STEROID-SULFONAMIDE COMBINATIONS		
<i>sulfacetamide-prednisolone ophthalmic (eye) drops 10 %-0.23 % (0.25 %)</i>	1	
SULFONAMIDES		
<i>sulfacetamide sodium ophthalmic (eye) drops 10 %</i>	1	
<i>sulfacetamide sodium ophthalmic (eye) ointment 10 %</i>	1	
SYMPATHOMIMETICS		
ALPHAGAN P OPHTHALMIC (EYE) DROPS 0.1 %, 0.15 %	4	
<i>apraclonidine ophthalmic (eye) drops 0.5 %</i>	1	
<i>brimonidine ophthalmic (eye) drops 0.1 %</i>	4	
<i>brimonidine ophthalmic (eye) drops 0.15 %, 0.2 %</i>	1	
IOPIDINE OPHTHALMIC (EYE) DROPPERETTE 1 %	4	
VASOCONSTRICTOR DECONGESTANTS		
CYCLOMYDRIL OPHTHALMIC (EYE) DROPS 0.2-1 %	4	
<i>phenylephrine hcl ophthalmic (eye) drops 10 %, 2.5 %</i>	1	
UPNEEQ (PF) OPHTHALMIC (EYE) DROPPERETTE 0.1 %	4	PA; QL (30 per 30 days)

Drug Name	Tier	Requirements / Limits
RESPIRATORY, ALLERGY, COUGH & COLD		
ANTI-HISTAMINE & ANTI-ALLERGENIC AGENTS		
AUVI-Q INJECTION AUTO-INJECTOR 0.1 MG/0.1 ML, 0.15 MG/0.15 ML, 0.3 MG/0.3 ML	EX	
<i>carbinoxamine maleate oral liquid 4 mg/5 ml</i>	EX	
CARBINOXAMINE MALEATE ORAL SUSPENSION, EXTENDED REL 12 HR 4 MG/5 ML	4	PA
<i>carbinoxamine maleate oral tablet 4 mg, 6 mg</i>	EX	
<i>cetirizine oral solution 1 mg/ml</i>	1	
CLARINEX ORAL TABLET 5 MG	EX	
<i>clemastine oral syrup 0.5 mg/5 ml</i>	EX	
<i>clemastine oral tablet 2.68 mg</i>	EX	
<i>cyproheptadine oral syrup 2 mg/5 ml</i>	1	
<i>cyproheptadine oral tablet 4 mg</i>	1	
<i>desloratadine oral tablet 5 mg</i>	1	
<i>desloratadine oral tablet, disintegrating 2.5 mg, 5 mg</i>	1	
<i>dexchlorpheniramine maleate oral solution 2 mg/5 ml</i>	EX	
DIPHEN ORAL ELIXIR 12.5 MG/5 ML	4	
EPINEPHRINE INJECTION AUTO-INJECTOR 0.15 MG/0.15 ML	2	QL (4 per 30 days)
<i>epinephrine injection auto-injector 0.15 mg/0.3 ml, 0.3 mg/0.3 ml</i>	1	QL (4 per 30 days)
EPIPEN INJECTION AUTO-INJECTOR 0.3 MG/0.3 ML	4	QL (4 per 30 days)
EPIPEN JR INJECTION AUTO-INJECTOR 0.15 MG/0.3 ML	4	QL (4 per 30 days)
<i>hydroxyzine hcl oral solution 10 mg/5 ml</i>	1	
<i>hydroxyzine hcl oral tablet 10 mg, 25 mg, 50 mg</i>	1	
<i>hydroxyzine pamoate oral capsule 100 mg, 25 mg, 50 mg</i>	1	
KARBINAL ER ORAL SUSPENSION, EXTENDED REL 12 HR 4 MG/5 ML	EX	
<i>levocetirizine oral solution 2.5 mg/5 ml</i>	1	
<i>levocetirizine oral tablet 5 mg</i>	1	

Drug Name	Tier	Requirements / Limits
NEFFY NASAL SPRAY, NON-AEROSOL 1 MG/SPRAY (0.1 ML), 2 MG/SPRAY (0.1 ML)	4	QL (4 per 30 days)
<i>promethazine oral syrup 6.25 mg/5 ml</i>	1	
<i>promethazine oral tablet 12.5 mg, 25 mg, 50 mg</i>	1	
<i>promethazine rectal suppository 12.5 mg, 25 mg</i>	1	
<i>promethegan rectal suppository 12.5 mg, 25 mg, 50 mg</i>	1	
RYCLORA ORAL SOLUTION 2 MG/5 ML	EX	
RYVENT ORAL TABLET 6 MG	EX	
COUGH & COLD THERAPY		
<i>benzonatate oral capsule 100 mg, 150 mg, 200 mg</i>	1	
BROMFED DM ORAL SYRUP 2-30-10 MG/5 ML	4	
<i>brompheniramine-pseudoeph-dm oral syrup 2-30-10 mg/5 ml</i>	4	
CLARINEX-D 12 HOUR ORAL TABLET, ER MULTIPHASE 12 HR 2.5-120 MG	EX	
<i>codeine-guaiphenesin oral liquid 10-100 mg/5 ml</i>	1	
CODITUSSIN AC ORAL LIQUID 10-200 MG/5 ML	4	
CODITUSSIN DAC ORAL LIQUID 30-10-200 MG/5 ML	4	
<i>g tussin ac oral liquid 10-100 mg/5 ml</i>	1	
HISTEX-AC ORAL SYRUP 2.5-10-10 MG/5 ML	2	
HYCODAN (WITH HOMATROPINE) ORAL SOLUTION 5-1.5 MG/5 ML	4	
HYCODAN (WITH HOMATROPINE) ORAL TABLET 5-1.5 MG	4	
<i>hydrocodone-chlorpheniramine oral suspension, extended rel 12 hr 10-8 mg/5 ml</i>	1	
<i>hydrocodone-homatropine oral solution 5-1.5 mg/5 ml</i>	1	
<i>hydrocodone-homatropine oral tablet 5-1.5 mg</i>	1	
<i>hydromet oral solution 5-1.5 mg/5 ml</i>	1	
MAR-COF CG ORAL LIQUID 7.5-225 MG/5 ML	4	
<i>maxi-tuss ac oral liquid 10-100 mg/5 ml</i>	4	
MAXI-TUSS CD ORAL LIQUID 4-10-10 MG/5 ML	4	

Drug Name	Tier	Requirements / Limits
NINJACOF-XG ORAL LIQUID 8-200 MG/5 ML	4	
POLY-TUSSIN AC ORAL LIQUID 4-10-10 MG/5 ML	2	
<i>promethazine-codeine oral syrup 6.25-10 mg/5 ml</i>	1	
<i>promethazine-dm oral syrup 6.25-15 mg/5 ml</i>	1	
<i>promethazine-phenylephrine oral syrup 6.25-5 mg/5 ml</i>	1	
RESPA-AR ORAL TABLET EXTENDED RELEASE 12 HR 8-90-0.24 MG	4	
TUXARIN ER ORAL TABLET EXTENDED RELEASE 12 HR 8-54.3 MG	4	
PULMONARY AGENTS		
ACCOLATE ORAL TABLET 10 MG, 20 MG	EX	
<i>acetylcysteine solution 100 mg/ml (10 %), 200 mg/ml (20 %)</i>	4	
ADCIRCA ORAL TABLET 20 MG	EX	
ADEMPAS ORAL TABLET 0.5 MG, 1 MG, 1.5 MG, 2 MG, 2.5 MG	4	PA; SP; LA
ADVAIR DISKUS INHALATION BLISTER WITH DEVICE 100-50 MCG/DOSE, 250-50 MCG/DOSE, 500-50 MCG/DOSE	4	QL (1 per 30 days)
ADVAIR HFA INHALATION AEROSOL INHALER 115-21 MCG/ACTUATION, 230-21 MCG/ACTUATION, 45-21 MCG/ACTUATION	2	QL (1 per 30 days)
AIRSUPRA INHALATION HFA AEROSOL INHALER 90-80 MCG/ACTUATION	4	ST; QL (2 per 30 days)
ALBUTEROL HFA 90 MCG INHALER 90 MCG/ACTUATION (BRAND)	EX	PA; QL
<i>albuterol hfa 90 mcg inhaler 90 mcg/actuation (generic)</i>	1	QL
<i>albuterol sulfate inhalation inhalation solution for nebulization 0.63 mg/3 ml, 1.25 mg/3 ml, 2.5 mg /3 ml (0.083 %), 2.5 mg/0.5 ml, 5 mg/ml</i>	1	
<i>albuterol sulfate inhalation oral syrup 2 mg/5 ml</i>	1	
<i>albuterol sulfate inhalation oral tablet 2 mg, 4 mg</i>	1	
<i>albuterol sulfate inhalation oral tablet extended release 12 hr 4 mg, 8 mg</i>	1	
ALVESCO INHALATION HFA AEROSOL INHALER 160 MCG/ACTUATION, 80 MCG/ACTUATION	EX	

Drug Name	Tier	Requirements / Limits
ALYFTREK ORAL TABLET 10-50-125 MG, 4-20-50 MG	3	PA; SP; LA
<i>alyq oral tablet 20 mg</i>	3	PA; SP
<i>ambrisentan oral tablet 10 mg, 5 mg</i>	3	PA; SP; LA
ANORO ELLIPTA INHALATION BLISTER WITH DEVICE 62.5-25 MCG/ACTUATION	2	QL (1 per 30 days)
<i>arformoterol inhalation solution for nebulization 15 mcg/2 ml</i>	4	
ARNUITY ELLIPTA INHALATION BLISTER WITH DEVICE 100 MCG/ACTUATION, 200 MCG/ACTUATION	2	QL (1 per 30 days)
ARNUITY ELLIPTA INHALATION BLISTER WITH DEVICE 50 MCG/ACTUATION	2	
ASMANEX HFA INHALATION AEROSOL INHALER 100 MCG/ACTUATION, 200 MCG/ACTUATION, 50 MCG/ACTUATION	4	PA; QL (1 per 30 days)
ASMANEX TWISTHALER INHALATION AEROSOL POWDR BREATH ACTIVATED 110 MCG/ ACTUATION (30), 220 MCG/ ACTUATION (120), 220 MCG/ ACTUATION (14), 220 MCG/ ACTUATION (30), 220 MCG/ ACTUATION (60)	4	PA; QL (1 per 30 days)
ATROVENT HFA INHALATION AEROSOL INHALER 17 MCG/ACTUATION	4	QL (2 per 30 days)
<i>azelastine-fluticasone nasal spray, non-aerosol 137-50 mcg/spray</i>	4	
BEVESPI AEROSPHERE INHALATION HFA AEROSOL INHALER 9-4.8 MCG	4	
<i>bosentan oral tablet 125 mg, 62.5 mg</i>	3	PA; SP; LA
BREO ELLIPTA INHALATION BLISTER WITH DEVICE 100-25 MCG/DOSE	2	QL (1 per 30 days)
BREO ELLIPTA INHALATION BLISTER WITH DEVICE 200-25 MCG/DOSE, 50-25 MCG/DOSE	2	
<i>breyndra inhalation hfa aerosol inhaler 160-4.5 mcg/actuation, 80-4.5 mcg/actuation</i>	1	QL (1 per 30 days)
BREZTRI AEROSPHERE INHALATION HFA AEROSOL INHALER 160-9-4.8 MCG/ACTUATION	4	
BRONCHITOL INHALATION CAPSULE, W/INHALATION DEVICE 40 MG	4	ST; SP; LA; QL (400 per 30 days)

Drug Name	Tier	Requirements / Limits
BROVANA INHALATION SOLUTION FOR NEBULIZATION 15 MCG/2 ML	EX	
<i>budesonide inhalation suspension for nebulization 0.25 mg/2 ml, 0.5 mg/2 ml</i>	1	QL (120 per 30 days)
<i>budesonide inhalation suspension for nebulization 1 mg/2 ml</i>	1	QL (30 per 30 days)
<i>budesonide-formoterol inhalation hfa aerosol inhaler 160-4.5 mcg/actuation, 80-4.5 mcg/actuation</i>	1	QL (1 per 30 days)
COMBIVENT RESPIMAT INHALATION MIST 20-100 MCG/ACTUATION	2	QL (2 per 30 days)
<i>cromolyn inhalation solution for nebulization 20 mg/2 ml</i>	1	
DALIRESP ORAL TABLET 250 MCG, 500 MCG	EX	
DUAKLIR PRESSAIR INHALATION AEROSOL POWDR BREATH ACTIVATED 400-12 MCG/ACTUATION	4	
DULERA INHALATION HFA AEROSOL INHALER 100-5 MCG/ACTUATION, 200-5 MCG/ACTUATION, 50-5 MCG/ACTUATION	2	QL (1 per 30 days)
DYMISTA NASAL SPRAY, NON-AEROSOL 137-50 MCG/SPRAY	EX	
ELIXOPHYLLIN ORAL ELIXIR 80 MG/15 ML	4	
ESBRIET ORAL CAPSULE 267 MG	EX	
ESBRIET ORAL TABLET 267 MG, 801 MG	EX	
FASENRA PEN SUBCUTANEOUS AUTO-INJECTOR 30 MG/ML	3	PA; SP; LA
FASENRA SUBCUTANEOUS SYRINGE 10 MG/0.5 ML, 30 MG/ML	3	PA; SP; LA
FIRAZYR SUBCUTANEOUS SYRINGE 30 MG/3 ML	EX	
<i>flunisolide nasal spray, non-aerosol 25 mcg (0.025 %)</i>	EX	
FLUTICASONE FUROATE-VILANTEROL INHALATION BLISTER WITH DEVICE 100-25 MCG/DOSE, 200-25 MCG/DOSE	EX	
FLUTICASONE PROPIONATE INHALATION BLISTER WITH DEVICE 100 MCG/ACTUATION, 50 MCG/ACTUATION	4	QL (1 per 30 days)

Drug Name	Tier	Requirements / Limits
FLUTICASONE PROPIONATE INHALATION BLISTER WITH DEVICE 250 MCG/ACTUATION	4	QL (4 per 30 days)
FLUTICASONE PROPIONATE INHALATION HFA AEROSOL INHALER 110 MCG/ACTUATION, 44 MCG/ACTUATION	2	QL (1 per 30 days)
FLUTICASONE PROPIONATE INHALATION HFA AEROSOL INHALER 220 MCG/ACTUATION	2	QL (2 per 30 days)
<i>fluticasone propionate nasal spray, suspension 50 mcg/actuation</i>	1	
FLUTICASONE PROPION-SALMETEROL INHALATION AEROSOL POWDR BREATH ACTIVATED 113-14 MCG/ACTUATION, 232-14 MCG/ACTUATION, 55-14 MCG/ACTUATION	4	
<i>fluticasone propion-salmeterol inhalation blister with device 100-50 mcg/dose, 250-50 mcg/dose, 500-50 mcg/dose</i>	1	QL (1 per 30 days)
FLUTICASONE PROPION-SALMETEROL INHALATION HFA AEROSOL INHALER 115-21 MCG/ACTUATION, 230-21 MCG/ACTUATION, 45-21 MCG/ACTUATION	4	QL (1 per 30 days)
<i>formoterol fumarate inhalation solution for nebulization 20 mcg/2 ml</i>	1	
HAEGARDA SUBCUTANEOUS RECON SOLN 2,000 UNIT, 3,000 UNIT	4	PA; SP; LA
HYPER-SAL INHALATION SOLUTION FOR NEBULIZATION 3.5 %, 7 %	4	
<i>icatibant subcutaneous syringe 30 mg/3 ml</i>	3	PA; SP
INCRUSE ELLIPTA INHALATION BLISTER WITH DEVICE 62.5 MCG/ACTUATION	EX	
<i>ipratropium bromide inhalation solution 0.02 %</i>	1	
<i>ipratropium-albuterol inhalation solution for nebulization 0.5 mg-3 mg(2.5 mg base)/3 ml</i>	1	QL (180 per 30 days)
KALYDECO ORAL GRANULES IN PACKET 13.4 MG, 25 MG, 5.8 MG, 50 MG, 75 MG	3	PA; SP; LA
KALYDECO ORAL TABLET 150 MG	3	PA; SP; LA
LETAIRIS ORAL TABLET 10 MG, 5 MG	EX	
<i>levalbuterol hcl inhalation solution for nebulization 0.31 mg/3 ml, 0.63 mg/3 ml, 1.25 mg/0.5 ml, 1.25 mg/3 ml</i>	EX	

Drug Name	Tier	Requirements / Limits
LEVALBUTEROL TARTRATE INHALATION HFA AEROSOL INHALER 45 MCG/ACTUATION	EX	
<i>mometasone nasal spray, non-aerosol 50 mcg/actuation</i>	EX	
<i>montelukast oral granules in packet 4 mg</i>	1	
<i>montelukast oral tablet 10 mg</i>	1	
<i>montelukast oral tablet, chewable 4 mg, 5 mg</i>	1	
<i>nebusal inhalation solution for nebulization 3 %</i>	1	
NEBUSAL INHALATION SOLUTION FOR NEBULIZATION 6 %	4	
NUCALA SUBCUTANEOUS AUTO-INJECTOR 100 MG/ML	3	PA; SP; LA; QL (3 per 30 days)
NUCALA SUBCUTANEOUS SYRINGE 100 MG/ML, 40 MG/0.4 ML	3	PA; SP; LA; QL (3 per 30 days)
OFEV ORAL CAPSULE 100 MG, 150 MG	3	PA; SP; LA; QL (60 per 30 days)
OHTUVAYRE INHALATION SUSPENSION FOR NEBULIZATION 3 MG/2.5 ML	4	PA; SP
OMNARIS NASAL SPRAY, NON-AEROSOL 50 MCG	EX	
OPSUMIT ORAL TABLET 10 MG	4	PA; SP; LA
OPSYNVI ORAL TABLET 10-20 MG, 10-40 MG	4	PA; SP; LA
ORKAMBI ORAL GRANULES IN PACKET 100-125 MG, 150-188 MG, 75-94 MG	4	PA; SP; LA
ORKAMBI ORAL TABLET 100-125 MG, 200-125 MG	4	PA; SP; LA
ORLADEYO ORAL CAPSULE 110 MG, 150 MG	4	PA; SP; QL (30 per 30 days)
PERFOROMIST INHALATION SOLUTION FOR NEBULIZATION 20 MCG/2 ML	EX	
<i>pirfenidone oral capsule 267 mg</i>	3	PA; SP; LA; QL (270 per 30 days)
<i>pirfenidone oral tablet 267 mg, 801 mg</i>	3	PA; SP; LA; QL (90 per 30 days)
PIRFENIDONE ORAL TABLET 534 MG	EX	
PROAIR RESPICLICK INHALATION AEROSOL POWDR BREATH ACTIVATED 90 MCG/ACTUATION	EX	
PULMICORT FLEXHALER INHALATION AEROSOL POWDR BREATH ACTIVATED 180 MCG/ACTUATION	4	PA; QL (2 per 30 days)

Drug Name	Tier	Requirements / Limits
PULMICORT FLEXHALER INHALATION AEROSOL POWDR BREATH ACTIVATED 90 MCG/ACTUATION	4	PA; QL (1 per 30 days)
PULMICORT INHALATION SUSPENSION FOR NEBULIZATION 0.25 MG/2 ML, 0.5 MG/2 ML, 1 MG/2 ML	EX	
<i>pulmosal inhalation solution for nebulization 7 %</i>	4	
PULMOZYME INHALATION SOLUTION 1 MG/ML	3	PA; SP; LA
QNASL NASAL HFA AEROSOL INHALER 40 MCG/ACTUATION, 80 MCG/ACTUATION	EX	
QVAR REDIHALER INHALATION HFA AEROSOL BREATH ACTIVATED 40 MCG/ACTUATION, 80 MCG/ACTUATION	2	
REVATIO ORAL TABLET 20 MG	EX	
<i>roflumilast oral tablet 250 mcg, 500 mcg</i>	4	
RYALTRIS NASAL SPRAY, NON-AEROSOL 665-25 MCG/SPRAY	4	PA
<i>sajazir subcutaneous syringe 30 mg/3 ml</i>	3	PA; SP; LA
SEREVENT DISKUS INHALATION BLISTER WITH DEVICE 50 MCG/DOSE	2	
<i>sildenafil (pulm.hypertension) oral suspension for reconstitution 10 mg/ml</i>	3	PA; SP
<i>sildenafil (pulm.hypertension) oral tablet 20 mg</i>	4	PA; SP
SINGULAIR ORAL GRANULES IN PACKET 4 MG	EX	
SINGULAIR ORAL TABLET 10 MG	EX	
SINGULAIR ORAL TABLET, CHEWABLE 4 MG, 5 MG	EX	
<i>sodium chloride inhalation solution for nebulization 0.9 %, 10 %, 3 %, 7 %</i>	1	
SPIRIVA RESPIMAT INHALATION MIST 1.25 MCG/ACTUATION	2	
SPIRIVA RESPIMAT INHALATION MIST 2.5 MCG/ACTUATION	2	QL (1 per 30 days)
SPIRIVA WITH HANDIHALER INHALATION CAPSULE, W/INHALATION DEVICE 18 MCG	4	QL (30 per 30 days)
STIOLTO RESPIMAT INHALATION MIST 2.5-2.5 MCG/ACTUATION	2	

Drug Name	Tier	Requirements / Limits
STRIVERDI RESPIMAT INHALATION MIST 2.5 MCG/ACTUATION	EX	
SYMBICORT INHALATION HFA AEROSOL INHALER 160-4.5 MCG/ACTUATION, 80-4.5 MCG/ACTUATION	4	QL (1 per 30 days)
SYMDEKO ORAL TABLETS, SEQUENTIAL 100-150 MG (D)/ 150 MG (N), 50-75 MG (D)/ 75 MG (N)	3	PA; SP; LA
<i>tadalafil (pulm. hypertension) oral tablet 20 mg</i>	3	PA; SP
TADLIQ ORAL SUSPENSION 20 MG/5 ML (4 MG/ML)	4	PA; SP; LA
TAKHZYRO SUBCUTANEOUS SOLUTION 300 MG/2 ML (150 MG/ML)	4	PA; SP; LA; QL (2 per 30 days)
TAKHZYRO SUBCUTANEOUS SYRINGE 150 MG/ML, 300 MG/2 ML (150 MG/ML)	4	PA; SP; LA; QL (2 per 30 days)
<i>terbutaline oral tablet 2.5 mg, 5 mg</i>	1	
TEZSPIRE SUBCUTANEOUS PEN INJECTOR 210 MG/1.91 ML (110 MG/ML)	3	PA; SP; LA
TEZSPIRE SUBCUTANEOUS SYRINGE 210 MG/1.91 ML (110 MG/ML)	3	PA; SP; LA
THEO-24 ORAL CAPSULE, EXTENDED RELEASE 24HR 100 MG, 200 MG, 300 MG, 400 MG	4	
<i>theophylline oral elixir 80 mg/15 ml</i>	1	
<i>theophylline oral solution 80 mg/15 ml</i>	1	
<i>theophylline oral tablet extended release 12 hr 100 mg, 200 mg, 300 mg, 450 mg</i>	1	
<i>theophylline oral tablet extended release 24 hr 400 mg, 600 mg</i>	1	
<i>tiotropium bromide inhalation capsule, w/inhalation device 18 mcg</i>	1	
TRACLEER ORAL TABLET 125 MG, 62.5 MG	EX	
TRACLEER ORAL TABLET FOR SUSPENSION 32 MG	3	PA; SP; LA
TRELEGY ELLIPTA INHALATION BLISTER WITH DEVICE 100-62.5-25 MCG, 200-62.5-25 MCG	2	
TRIKAFTA ORAL GRANULES IN PACKET, SEQUENTIAL 100-50-75MG (D) /75 MG (N), 80-40-60 MG (D) /59.5 MG (N)	3	PA; SP; LA

Drug Name	Tier	Requirements / Limits
TRIKAFTA ORAL TABLETS, SEQUENTIAL 100-50-75 MG(D) /150 MG (N), 50-25-37.5 MG (D)/75 MG (N)	3	PA; SP; LA
TUDORZA PRESSAIR INHALATION AEROSOL POWDR BREATH ACTIVATED 400 MCG/ACTUATION	4	QL (1 per 30 days)
TYVASO DPI INHALATION CARTRIDGE WITH INHALER 16 MCG, 16(112)-32(112) - 48(28) MCG, 32 MCG, 48 MCG, 64 MCG	4	PA; SP; LA
TYVASO INHALATION SOLUTION FOR NEBULIZATION 1.74 MG/2.9 ML (0.6 MG/ML)	4	PA; SP; LA
TYVASO REFILL KIT INHALATION SOLUTION FOR NEBULIZATION 1.74 MG/2.9 ML (0.6 MG/ML)	4	PA; SP; LA
TYVASO STARTER KIT INHALATION SOLUTION FOR NEBULIZATION 1.74 MG/2.9 ML	4	PA; SP; LA
UMECLIDINIUM-VILANTEROL INHALATION BLISTER WITH DEVICE 62.5-25 MCG/ACTUATION	2	QL (1 per 30 days)
VENTAVIS INHALATION SOLUTION FOR NEBULIZATION 10 MCG/ML, 20 MCG/ML	4	PA; SP; LA
VENTOLIN HFA INHALATION AEROSOL INHALER 90 MCG/ACTUATION	EX	
WINREVAIR SUBCUTANEOUS KIT 120 MG (60 MG X 2), 90 MG (45 MG X 2)	4	PA; SP; LA
<i>wixela inhub inhalation blister with device 100-50 mcg/dose, 250-50 mcg/dose, 500-50 mcg/dose</i>	1	QL (1 per 30 days)
XHANCE NASAL AEROSOL BREATH ACTIVATED 93 MCG/ACTUATION	EX	
XOLAIR SUBCUTANEOUS AUTO-INJECTOR 150 MG/ML	4	PA; SP; LA; QL (2 per 30 days)
XOLAIR SUBCUTANEOUS AUTO-INJECTOR 300 MG/2 ML	4	PA; SP; LA; QL (1 per 30 days)
XOLAIR SUBCUTANEOUS AUTO-INJECTOR 75 MG/0.5 ML	4	PA; SP; LA; QL (4 per 30 days)
XOLAIR SUBCUTANEOUS RECON SOLN 150 MG	4	PA; SP; LA; QL (1 per 30 days)
XOLAIR SUBCUTANEOUS SYRINGE 150 MG/ML	4	PA; SP; LA; QL (2 per 30 days)
XOLAIR SUBCUTANEOUS SYRINGE 300 MG/2 ML	4	PA; SP; LA; QL (1 per 30 days)

Drug Name	Tier	Requirements / Limits
XOLAIR SUBCUTANEOUS SYRINGE 75 MG/0.5 ML	4	PA; SP; LA; QL (4 per 30 days)
XOPENEX HFA INHALATION AEROSOL INHALER 45 MCG/ACTUATION	EX	
YUPELRI INHALATION SOLUTION FOR NEBULIZATION 175 MCG/3 ML	4	
YUTREPIA INHALATION CAPSULE, W/INHALATION DEVICE 106 MCG, 26.5 MCG, 53 MCG, 79.5 MCG	4	PA; SP; LA
<i>zafirlukast oral tablet 10 mg, 20 mg</i>	4	
ZETONNA NASAL HFA AEROSOL INHALER 37 MCG/ACTUATION	EX	
<i>zileuton oral tablet, er multiphase 12 hr 600 mg</i>	4	ST
ZYFLO ORAL TABLET 600 MG	EX	
PULMONARY DEVICES		
ACE AEROSOL CLOUD ENHANCER SPACER	2	
AEROCHAMBER MECHANICAL VENT SPACER	4	
AEROCHAMBER MINI SPACER	2	
AEROCHAMBER PLUS FLOW-VU SPACER	2	
AEROCHAMBER PLUS Z STAT SPACER	4	
AEROTRACH PLUS SPACER	2	
AEROVENT PLUS SPACER	2	
BREATHERITE MDI SPACER	4	
COMPACT SPACE CHAMBER SPACER	2	
EASIVENT HOLDING CHAMBER SPACER	2	
FLEXICHAMBER SPACER	2	
LITEAIRE MDI CHAMBER SPACER	2	
MICROCHAMBER SPACER	2	
MICROSPACER SPACER	2	
OPTICHAMBER DIAMOND VHC SPACER	2	
POCKET CHAMBER SPACER	2	
PRIMEAIRE SPACER	2	
PROCHAMBER SPACER	2	
RITEFLO AEROCHAMBER SPACER	2	
SPACE CHAMBER SPACER	4	
VORTEX HOLDING CHAMBER SPACER	2	

Drug Name	Tier	Requirements / Limits
UROLOGICALS		
ANTICHOLINERGICS & ANTISPASMODICS		
<i>darifenacin oral tablet extended release 24 hr 15 mg, 7.5 mg</i>	1	
<i>fesoterodine oral tablet extended release 24 hr 4 mg, 8 mg</i>	4	
<i>flavoxate oral tablet 100 mg</i>	1	
GEMTESA ORAL TABLET 75 MG	4	ST
<i>mirabegron oral tablet extended release 24 hr 25 mg, 50 mg</i>	EX	
MYRBETRIQ ORAL SUSPENSION, EXTENDED REL RECON 8 MG/ML	EX	
MYRBETRIQ ORAL TABLET EXTENDED RELEASE 24 HR 25 MG, 50 MG	EX	
<i>oxybutynin chloride oral syrup 5 mg/5 ml</i>	1	
OXYBUTYNIN CHLORIDE ORAL TABLET 2.5 MG	4	ST
<i>oxybutynin chloride oral tablet 5 mg</i>	1	
<i>oxybutynin chloride oral tablet extended release 24hr 10 mg, 15 mg, 5 mg</i>	1	
OXYTROL TRANSDERMAL PATCH SEMIWEEKLY 3.9 MG/24 HR	EX	
<i>solifenacin oral tablet 10 mg, 5 mg</i>	1	
<i>tolterodine oral capsule, extended release 24hr 2 mg, 4 mg</i>	1	
<i>tolterodine oral tablet 1 mg, 2 mg</i>	1	
TOVIAZ ORAL TABLET EXTENDED RELEASE 24 HR 4 MG, 8 MG	EX	
<i>trospium oral capsule, extended release 24hr 60 mg</i>	1	
<i>trospium oral tablet 20 mg</i>	1	
VESICARE LS ORAL SUSPENSION 1 MG/ML	4	ST
VESICARE ORAL TABLET 10 MG, 5 MG	EX	
BENIGN PROSTATIC HYPERPLASIA (BPH) THERAPY		
<i>alfuzosin oral tablet extended release 24 hr 10 mg</i>	1	
AVODART ORAL CAPSULE 0.5 MG	EX	
<i>dutasteride oral capsule 0.5 mg</i>	1	

Drug Name	Tier	Requirements / Limits
<i>dutasteride-tamsulosin oral capsule, er multiphase 24 hr 0.5-0.4 mg</i>	1	
ENTADFI ORAL CAPSULE 5-5 MG	4	PA
<i>finasteride oral tablet 5 mg</i>	1	
FLOMAX ORAL CAPSULE 0.4 MG	4	PA
JALYN ORAL CAPSULE, ER MULTIPHASE 24 HR 0.5-0.4 MG	4	
PROSCAR ORAL TABLET 5 MG	4	
RAPAFLO ORAL CAPSULE 4 MG, 8 MG	EX	
<i>silodosin oral capsule 4 mg, 8 mg</i>	1	
<i>tamsulosin oral capsule 0.4 mg</i>	1	
UROXATRAL ORAL TABLET EXTENDED RELEASE 24 HR 10 MG	EX	
CHOLINERGIC STIMULANTS		
<i>bethanechol chloride oral tablet 10 mg, 25 mg, 5 mg, 50 mg</i>	1	
MISCELLANEOUS UROLOGICALS		
CYSTAGON ORAL CAPSULE 150 MG, 50 MG	3	PA; SP
ELMIRON ORAL CAPSULE 100 MG	2	PA
K-PHOS NO 2 ORAL TABLET 305-700 MG	2	
K-PHOS ORIGINAL ORAL TABLET, SOLUBLE 500 MG	2	
<i>mb caps oral capsule 120-10.8-40.8 mg</i>	1	
<i>methen-sod phos-meth blue-hyos oral tablet 81.6-40.8-0.12 mg</i>	1	
ORACIT ORAL SOLUTION 490-640 MG/5 ML	4	
<i>potassium citrate oral tablet extended release 10 meq (1,080 mg), 15 meq, 5 meq (540 mg)</i>	1	
PROCYSBI ORAL CAPSULE, DELAYED REL SPRINKLE 25 MG, 75 MG	EX	
PROCYSBI ORAL GRANULES DEL RELEASE IN PACKET 300 MG, 75 MG	EX	
RENACIDIN IRRIGATION SOLUTION 1980.6 MG-59.4 MG-980.4MG/30ML	4	
RIVFLOZA SUBCUTANEOUS SOLUTION 80 MG/0.5 ML (160 MG/ML)	4	PA; SP
RIVFLOZA SUBCUTANEOUS SYRINGE 128 MG/0.8 ML, 160 MG/ML	4	PA; SP

Drug Name	Tier	Requirements / Limits
<i>sodium citrate-citric acid oral solution 490-640 mg/5 ml</i>	4	
URELLE ORAL TABLET 81-10.8-40.8 MG	4	
<i>uretron d-s oral tablet 81.6-10.8-40.8 mg</i>	1	
URIBEL TABS ORAL TABLET 81.6-0.12-10.8 MG	4	
URIMAR-T ORAL CAPSULE 120-10.8-40.8 MG	4	
<i>urimar-t oral tablet 120-10.8-0.12 mg</i>	1	
URNEVA ORAL CAPSULE 120-10.8-40.8 MG	4	
UROCIT-K 10 ORAL TABLET EXTENDED RELEASE 10 MEQ (1,080 MG)	4	
UROCIT-K 15 ORAL TABLET EXTENDED RELEASE 15 MEQ	4	
<i>urogesic-blue oral tablet 81.6-40.8-0.12 mg</i>	4	
<i>uro-mp oral capsule 118-10-40.8-36 mg</i>	1	
UROQID-ACID NO.2 ORAL TABLET 500-500 MG	4	
<i>uro-sp oral capsule 118-10-40.8-36 mg</i>	4	
<i>uryl oral tablet 81.6-40.8-0.12 mg</i>	1	
URINARY ANESTHETICS		
<i>phenazopyridine oral tablet 100 mg, 200 mg</i>	1	
PYRIDIUM ORAL TABLET 100 MG, 200 MG	EX	
VITAMINS, HEMATINICS & ELECTROLYTES		
ELECTROLYTES		
AURYXIA ORAL TABLET 210 MG IRON	4	PA
<i>calcium acetate(phosphat bind) oral capsule 667 mg</i>	1	
<i>calcium acetate(phosphat bind) oral tablet 667 mg</i>	1	
EFFER-K ORAL TABLET, EFFERVESCENT 10 MEQ, 20 MEQ	2	
<i>effe-r-k oral tablet, effervescent 25 meq</i>	1	
FERRIC CITRATE ORAL TABLET 210 MG IRON	4	PA
FOSRENOL ORAL POWDER IN PACKET 1,000 MG, 750 MG	EX	
FOSRENOL ORAL TABLET, CHEWABLE 1,000 MG, 500 MG, 750 MG	EX	

Drug Name	Tier	Requirements / Limits
GALZIN ORAL CAPSULE 25 MG (ZINC), 50 MG (ZINC)	4	SP
<i>klor-con 10 oral tablet extended release 10 meq</i>	1	
<i>klor-con 8 oral tablet extended release 8 meq</i>	1	
<i>klor-con m10 oral tablet, er particles/crystals 10 meq</i>	1	
<i>klor-con m15 oral tablet, er particles/crystals 15 meq</i>	1	
<i>klor-con m20 oral tablet, er particles/crystals 20 meq</i>	1	
<i>klor-con oral packet 20 meq</i>	1	
<i>klor-con/ef oral tablet, effervescent 25 meq</i>	1	
<i>lanthanum oral tablet, chewable 1,000 mg, 500 mg, 750 mg</i>	1	
LOKELMA ORAL POWDER IN PACKET 10 GRAM, 5 GRAM	4	PA
<i>lugols oral solution 5 %</i>	1	
POKONZA ORAL PACKET 10 MEQ	4	
<i>potassium chloride oral capsule, extended release 10 meq, 8 meq</i>	1	
<i>potassium chloride oral liquid 20 meq/15 ml, 40 meq/15 ml</i>	1	
<i>potassium chloride oral packet 20 meq</i>	1	
<i>potassium chloride oral tablet extended release 10 meq, 20 meq, 8 meq</i>	1	
POTASSIUM CHLORIDE ORAL TABLET EXTENDED RELEASE 15 MEQ	2	
<i>potassium chloride oral tablet, er particles/crystals 10 meq, 15 meq, 20 meq</i>	1	
REVELA ORAL POWDER IN PACKET 0.8 GRAM, 2.4 GRAM	4	PA
REVELA ORAL TABLET 800 MG	4	PA
<i>sevelamer carbonate oral powder in packet 0.8 gram, 2.4 gram</i>	4	
<i>sevelamer carbonate oral tablet 800 mg</i>	1	
<i>sevelamer hcl oral tablet 400 mg, 800 mg</i>	4	
<i>sodium polystyrene sulfonate oral powder</i>	1	
<i>sps (with sorbitol) oral suspension 15-20 gram/60 ml</i>	1	

Drug Name	Tier	Requirements / Limits
<i>sps (with sorbitol) rectal enema 30-40 gram/120 ml</i>	4	
<i>strong iodine oral solution 5 %</i>	1	
VELPHORO ORAL TABLET, CHEWABLE 500 MG	4	PA
VELTASSA ORAL POWDER IN PACKET 1 GRAM, 16.8 GRAM, 8.4 GRAM	4	PA
XPHOZAH ORAL TABLET 20 MG, 30 MG	4	PA; SP; QL (60 per 30 days)
MISCELLANEOUS VITAMINS, HEMATINICS, & ELECTROLYTES		
DOJOLVI ORAL LIQUID 8.3 KCAL/ML	4	PA; SP; LA
VITAMINS & HEMATINICS		
ACCRUFER ORAL CAPSULE 30 MG	4	PA
<i>b complex 100 injection solution 100-2-100-2-2 mg/ml</i>	4	
BAL-CARE DHA ESSENTIAL ORAL COMBO PACK, TABLET AND CAP, DR 27 MG IRON-1 MG -374 MG	4	
<i>bal-care dha oral combo pack, tablet and cap, dr 27-1-430 mg</i>	1	
CITRANATAL B-CALM (FE GLUC) ORAL TABLETS, SEQUENTIAL 20 MG IRON-1 MG - 25 MG/25 MG	4	
CITRANATAL MEDLEY ORAL CAPSULE 27 MG IRON-1 MG -200 MG	4	
<i>c-nate dha oral capsule 28 mg iron-1 mg -200 mg</i>	4	
<i>complete natal dha oral combo pack 29 mg iron- 1 mg-200 mg</i>	1	
CONCEPT DHA ORAL CAPSULE 35-1-200 MG	4	
CONCEPT OB ORAL CAPSULE 85-1 MG	4	
<i>cyanocobalamin (vitamin b-12) injection solution 1,000 mcg/ml</i>	1	
<i>cyanocobalamin (vitamin b-12) nasal spray, non-aerosol 500 mcg/spray</i>	4	
<i>dodex injection solution 1,000 mcg/ml</i>	4	
<i>elite-ob oral tablet 50 mg iron- 1.25 mg</i>	4	
ENBRACE HR ORAL CAPSULE, IR - DELAY REL, BIPHASE 1.5 MG IRON- 8.73 MG-6.4 MG	4	
<i>ergocalciferol (vitamin d2) oral capsule 1,250 mcg (50,000 unit)</i>	1	

Drug Name	Tier	Requirements / Limits
FA-8 ORAL CAPSULE 0.8 MG	4	
FLORIVA (FLUORIDE-VITAMIN D3) ORAL DROPS 0.25 MG (0.55 MG)-400 UNIT/ML	4	
<i>flotrex oral tablet, chewable 0.25 mg</i>	4	ACA PV
<i>fluoride (sodium) oral drops 0.5 mg (1.1 mg sod.fluorid)/ml</i>	4	ACA PV
<i>fluoride (sodium) oral tablet, chewable 0.25 mg (0.55 mg sod. fluoride), 0.5 mg (1.1 mg sodium fluorid), 1 mg (2.2 mg sod. fluoride)</i>	4	ACA PV
<i>folic acid injection solution 5 mg/ml</i>	1	
<i>folic acid oral tablet 1 mg</i>	1	
<i>folic acid oral tablet 400 mcg, 800 mcg</i>	1	ACA PV
<i>folivane-ob oral capsule 85-1 mg</i>	1	
<i>hydroxocobalamin intramuscular solution 1,000 mcg/ml</i>	1	
KOSHER PRENATAL PLUS IRON ORAL TABLET 30 MG IRON- 1 MG	4	
<i>ludent fluoride oral tablet, chewable 0.25 mg (0.55 mg sod. fluoride), 0.5 mg (1.1 mg sodium fluorid), 1 mg (2.2 mg sod. fluoride)</i>	4	ACA PV
MARNATAL-F ORAL CAPSULE 60 MG IRON- 1 MG	4	
MECOBALAMIN (VITAMIN B12) INJECTION RECON SOLN 10,000 MCG	4	
<i>m-natal plus oral tablet 27 mg iron- 1 mg</i>	1	
<i>multi-vitamin with fluoride oral drops 0.25 mg/ml, 0.5 mg/ml</i>	4	ACA PV
<i>multi-vitamin with fluoride oral tablet, chewable 0.25 mg, 0.5 mg, 1 mg</i>	4	ACA PV
<i>mvc-fluoride oral tablet, chewable 0.25 mg, 0.5 mg, 1 mg</i>	4	ACA PV
<i>mynatal oral capsule 65 mg iron- 1 mg</i>	1	
<i>mynatal plus oral tablet 65 mg iron- 1 mg</i>	1	
<i>mynatal-z oral tablet 65 mg iron- 1 mg</i>	1	
NASCOBAL NASAL SPRAY, NON-AEROSOL 500 MCG/SPRAY	EX	
NATAL PNV ORAL TABLET 6 MG IRON- 833.5 MCG DFE	4	
NEEVODHA (WITH ALGAL OIL) ORAL CAPSULE 27 MG IRON-1.13 MG-581.92 MG	4	

Drug Name	Tier	Requirements / Limits
NEONATAL COMPLETE ORAL TABLET 29-1 MG	4	
NEONATAL FE ORAL TABLET 90 MG-120 MG-12 MCG-1,000 MCG	4	
NEONATAL PLUS VITAMIN ORAL TABLET 27 MG IRON- 1 MG	4	
NEONATAL-DHA ORAL COMBO PACK 29-1-200-500 MG	4	
<i>neo-vital rx oral tablet 27 mg iron- 1 mg</i>	4	
NESTABS ABC ORAL COMBO PACK 32 MG IRON-1 MG -120 MG-180 MG	4	
NESTABS DHA ORAL COMBO PACK 32 MG IRON- 1,000 MCG-230MG	4	
NESTABS ONE ORAL CAPSULE 38-1-225 MG	4	
NESTABS ORAL TABLET 32-1,000 MG-MCG	4	
<i>newgen oral tablet 32-1,000 mg-mcg</i>	4	
OB COMPLETE ONE ORAL CAPSULE 40-10-1-300 MG	EX	
OB COMPLETE ORAL TABLET 50 MG IRON-1.25 MG	EX	
OB COMPLETE PETITE ORAL CAPSULE 35 MG IRON-5 MG IRON-1 MG	EX	
OB COMPLETE PREMIER ORAL TABLET 30-20-1 MG	EX	
OB COMPLETE WITH DHA ORAL CAPSULE 30 MG IRON-10 MG IRON-1 MG	EX	
<i>pnv-dha oral capsule 27 mg iron-1 mg -300 mg</i>	1	
<i>pnv-omega oral capsule 28-1-300 mg</i>	1	
<i>pnv-select oral tablet 27-1 mg</i>	1	
<i>pr natal 400 ec oral combo pack, tablet and cap, dr 29-1-400 mg</i>	1	
<i>pr natal 400 oral combo pack 29-1-400 mg</i>	1	
<i>pr natal 430 ec oral combo pack, tablet and cap, dr 29-1-430 mg</i>	1	
<i>pr natal 430 oral combo pack 29 mg iron-1 mg -430 mg</i>	1	
PRENATA ORAL TABLET, CHEWABLE 29 MG IRON- 1 MG	4	
<i>prenatabs fa oral tablet 29-1 mg</i>	1	

Drug Name	Tier	Requirements / Limits
<i>prenatabs rx oral tablet 29 mg iron- 1 mg</i>	1	
<i>prenatal plus (calcium carb) oral tablet 27 mg iron- 1 mg</i>	1	
PRENATAL PLUS DHA ORAL COMBO PACK 27 MG IRON-1 MG -312 MG-250 MG	4	
<i>prenatal plus oral tablet 29 mg iron- 1 mg</i>	1	
PRENATAL PLUS VITAMIN-MINERAL ORAL TABLET 27 MG IRON- 1 MG	4	
<i>prenatal-u oral capsule 106.5-1 mg</i>	1	
PRENATE AM ORAL TABLET 1-500 MG	4	
PRENATE CHEWABLE ORAL TABLET, CHEWABLE 1 MG	4	
PRENATE DHA (FERR ASP GLYCIN) ORAL CAPSULE 18 MG IRON-1 MG -300 MG	4	
PRENATE ELITE (IRON ASP GLYC) ORAL TABLET 20 MG IRON- 1 MG	4	
PRENATE ENHANCE ORAL CAPSULE 28 MG IRON- 1 MG-400 MG	4	
PRENATE ESSENTIAL(IRON-ASP-GL) ORAL CAPSULE 18 MG IRON- 1 MG-300 MG	4	
PRENATE MINI (FERR ASP GLYCIN) ORAL CAPSULE 18-1-350 MG	4	
PRENATE PIXIE ORAL CAPSULE 10 MG IRON- 1 MG-200 MG	4	
PRENATE RESTORE ORAL CAPSULE 27 MG IRON- 1 MG-400 MG	4	
PRENATE STAR ORAL TABLET 20 MG IRON-1 MG	4	
PRIMACARE ORAL CAPSULE 30-1-300 MG	4	
PROVIDA OB ORAL CAPSULE 40 MG IRON-1.25 MG	4	
R-NATAL OB ORAL CAPSULE 20 MG IRON-1 MG-320 MG	4	
SELECT-OB (FOLIC ACID) ORAL TABLET, CHEWABLE 29 MG IRON- 1 MG	4	
SELECT-OB + DHA ORAL COMBO PACK 29 MG IRON-1 MG -250 MG	4	
SELECT-OB ORAL TABLET, CHEWABLE 29 MG IRON- 1 MG	4	

Drug Name	Tier	Requirements / Limits
<i>se-natal 19 chewable oral tablet, chewable 29 mg iron- 1 mg</i>	1	
<i>se-natal 19 oral tablet 29 mg iron- 1 mg</i>	1	
<i>soluvita a,c,d with fluoride oral drops 0.25 mg fluor. (0.55 mg)/ml</i>	4	ACA PV
<i>soluvita oral drops 0.5 mg (1.1 mg sod.fluorid)/ml</i>	4	ACA PV
<i>taron-c dha oral capsule 35-1-200 mg</i>	1	
THRIVITE RX ORAL TABLET 29 MG IRON- 1 MG	4	
TRICARE ORAL TABLET 27 MG IRON- 1 MG	4	
<i>trinatal rx 1 oral tablet 60 mg iron-1 mg</i>	1	
<i>trinate oral tablet 28 mg iron- 1 mg</i>	1	
TRINAZ ORAL TABLET 12-1 MG	EX	
TRISTART DHA ORAL CAPSULE 31 MG IRON- 1 MG-200 MG	4	
<i>tri-vitamin with fluoride oral drops 0.25 mg fluor. (0.55 mg)/ml, 0.5 mg fluoride (1.1 mg)/ml</i>	4	ACA PV
VITAFOL FE PLUS ORAL CAPSULE 90 MG IRON- 1 MG-200 MG	4	
VITAFOL GUMMIES ORAL TABLET, CHEWABLE 3.33 MG IRON- 0.33 MG	4	
VITAFOL ULTRA ORAL CAPSULE 29 MG IRON- 1 MG-200 MG	4	
VITAFOL-OB ORAL TABLET 65-1 MG	4	
VITAFOL-OB+DHA ORAL COMBO PACK 65-1-250 MG	4	
VITAFOL-ONE ORAL CAPSULE 29 MG IRON- 1 MG-200 MG	4	
VITAMEDMD ONE RX ORAL CAPSULE 30 MG IRON-1MG -200 MG	4	
<i>vitamins a, c, d and fluoride oral drops 0.25 mg fluor. (0.55 mg)/ml, 0.5 mg fluoride (1.1 mg)/ml</i>	4	ACA PV
<i>wescap-c dha oral capsule 35-1-200 mg</i>	4	
<i>wescap-pn dha oral capsule 27 mg iron-1 mg -300 mg</i>	4	
<i>wesnatal dha complete oral combo pack 29 mg iron- 1 mg-200 mg</i>	1	
<i>wesnate dha oral capsule 28 mg iron-1 mg -200 mg</i>	4	

Drug Name	Tier	Requirements / Limits
<i>westab plus oral tablet 27 mg iron- 1 mg</i>	1	
<i>westgel dha oral capsule 31 mg iron- 1 mg-200 mg</i>	4	
<i>zatean-pn dha oral capsule 27 mg iron-1 mg -300 mg</i>	1	
<i>zatean-pn plus oral capsule 28-1-300 mg</i>	1	
<i>zingiber oral tablet 1.2 mg-40 mg- 124.1 mg-100 mg</i>	4	

Index

- A**
- abacavir*.....2
 - abacavir-lamivudine*.....2
 - ABILIFY47
 - ABILIFY ASIMTUFII.....47
 - ABILIFY MAINTENA.....47
 - abiraterone*15
 - abirtega*15
 - ABRILADA(CF).....138
 - ABRILADA(CF) PEN138
 - ABRYSVO (PF).....132
 - ABSORICA.....84
 - ABSORICA LD84
 - acamprosate*96
 - ACANYA.....84
 - acarbose*114
 - ACCOLATE.....166
 - ACCRUFER.....179
 - ACCU-CHEK AVIVA PLUS
TEST STRP.....105
 - ACCU-CHEK GUIDE TEST
STRIPS.....105
 - ACCU-CHEK SMARTVIEW
TEST STRIP105
 - ACCUPRIL63
 - ACCURETIC63
 - accutane*84
 - ACCUTREND GLUCOSE
TEST STRIPS105
 - ACE AEROSOL CLOUD
ENHANCER.....174
 - acebutolol*.....63
 - acetaminophen-caff-*
dihydrocod.....39
 - acetaminophen-codeine*.....39
 - acetazolamide*.....160
 - acetic acid*97, 102
 - acetylcysteine*166
 - ACIPHEX.....127
 - acitretin*79
 - ACTEMRA138
 - ACTEMRA ACTPEN.....138
 - ACTHAR102
 - ACTHAR SELFJECT103
 - ACTHIB (PF).....132
 - ACTIMMUNE132
 - ACTIVELLA143
 - ACTONEL137
 - ACTOPLUS MET114
 - ACTOS.....114
 - ACULAR.....159
 - ACULAR LS.....159
 - ACUVAIL (PF).....159
 - acyclovir*2, 92
 - ACZONE.....84
 - ADACEL(TDAP
ADOLESN/ADULT)(PF)
.....132
 - ADALIMUMAB-AACF138
 - ADALIMUMAB-AACF(CF)
PEN CROHNS138
 - ADALIMUMAB-AACF(CF)
PEN PS-UV138
 - ADALIMUMAB-AATY...138,
139
 - ADALIMUMAB-AATY(CF)
AI CROHNS.....139
 - ADALIMUMAB-ADAZ....139
 - ADALIMUMAB-ADB.....139
 - ADALIMUMAB-ADB(CF)
PEN CROHNS139
 - ADALIMUMAB-ADB(CF)
PEN PS-UV139
 - ADALIMUMAB-FKJP.....139
 - ADALIMUMAB-RYVK ...139
 - adapalene*84
 - ADAPALENE84
 - adapalene-benzoyl peroxide*.84
 - ADASUVE.....47
 - ADBRY82, 83
 - ADCIRCA166
 - ADDERALL47
 - ADDERALL XR.....47
 - ADDYI.....48
 - adefovir*.....2
 - ADEMPAS.....166
 - ADLARITY35
 - ADMELOG SOLOSTAR U-
100 INSULIN.....107
 - ADMELOG U-100 INSULIN
LISPRO107
 - adthyza*.....117
 - ADTHYZA.....117
 - adult aspirin regimen*42
 - ADVAIR DISKUS166
 - ADVAIR HFA166
 - ADZENYS XR-ODT48
 - AEROCHAMBER
MECHANICAL VENT..174
 - AEROCHAMBER MINI ...174
 - AEROCHAMBER PLUS
FLOW-VU.....174
 - AEROCHAMBER PLUS Z
STAT174
 - AEROTRACH PLUS.....174
 - AEROVENT PLUS.....174
 - AFINITOR15
 - AFINITOR DISPERZ15
 - afirmelle*.....148
 - AFREZZA107
 - after pill*148
 - AFTERA.....148
 - AGAMREE103
 - AGRYLIN97
 - AIMOVIG AUTOINJECTOR
.....33
 - AIRSUPRA166
 - AJOVY AUTOINJECTOR..33
 - AJOVY SYRINGE.....33
 - AKEEGA.....15
 - AKLIEF84
 - AKTEN (PF)158
 - AKYNZEO (NETUPITANT)
.....120
 - ala-cort*92
 - ALA-SCALP92
 - albendazole*.....9
 - albuterol sulfate inhalation* 166
 - ALCAINE.....158
 - alclometasone*92
 - ALCORTIN A.....89
 - ALDACTONE.....63
 - ALECENSA15
 - alendronate*.....137
 - alfuzosin*.....175
 - ALHEMO PEN72
 - ALINIA9
 - aliskiren*63
 - ALKERAN.....15
 - ALKINDI SPRINKLE103
 - allopurinol*137
 - almotriptan malate*33
 - ALOGLIPTIN114

ALOGLIPTIN-METFORMIN	114	<i>amlodipine-valsartan-hcthiazyd</i>	63	AREXVY (PF)	132
ALOGLIPTIN-PIOGLITAZONE.....	114	<i>ammonium lactate</i>	83	<i>arformoterol</i>	167
<i>alose tron</i>	120	<i>amnesteem</i>	85	ARICEPT	35
ALPHAGAN P.....	163	<i>amoxapine</i>	48	ARIKAYCE	9
<i>alprazolam</i>	48	<i>amoxicil-clarithromy-lansopraz</i>	127	ARIMIDEX	15
<i>alprazolam intensol</i>	48	<i>amoxicillin</i>	11, 12	<i>aripiprazole</i>	48
ALREX.....	162	<i>amoxicillin-pot clavulanate</i> ..	12	ARISTADA	48
ALTABAX.....	89	<i>amphetamine sulfate</i>	48	ARISTADA INITIO.....	48
<i>altacaine</i>	158	<i>ampicillin</i>	12	ARIXTRA	72
ALTACE	63	AMPYRA.....	35	<i>armodafinil</i>	49
ALTAFLUOR BENOX	158	AMRIX.....	37	ARMOUR THYROID.....	117
<i>altavera (28)</i>	148	AMZEEQ	85	ARNUITY ELLIPTA	167
ALTOPREV	75	ANAFRANIL.....	48	AROMASIN.....	15
ALTRENO	84	<i>anagrelide</i>	97	ARTHROTEC 50	42
ALUNBRIG	15	ANALPRAM-HC.....	79, 121	ARTHROTEC 75	43
ALVAIZ	72	ANAPROX DS.....	42	<i>ascomp with codeine</i>	39
ALVESCO	166	<i>anaspaz</i>	119	<i>asenapine maleate</i>	49
<i>alvimopan</i>	120	<i>anastrozole</i>	15	<i>ashlyna</i>	149
<i>alyacen 1/35 (28)</i>	148	ANCOBON	1	ASMANEX HFA	167
<i>alyacen 7/7/7 (28)</i>	149	ANDROGEL	111	ASMANEX TWISTHALER	167
ALYFTREK	166	ANGELIQ	143	<i>aspirin</i>	43
<i>alyq</i>	167	ANNOVERA.....	147	<i>aspirin childrens</i>	43
<i>amantadine hcl</i>	2	ANORO ELLIPTA.....	167	<i>aspirin-dipyridamole</i>	72
AMBIEN	48	ANTIVERT	121	ASPRUZYO SPRINKLE	78
AMBIEN CR.....	48	<i>anucort-hc</i>	121	ASTAGRAF XL.....	15
<i>ambrisentan</i>	167	ANUSOL-HC.....	121	ATACAND.....	64
<i>amcinonide</i>	92	<i>apexicon e</i>	92	ATACAND HCT.....	63
<i>amethia</i>	149	APIDRA SOLOSTAR U-100	107	<i>atazanavir</i>	2
<i>amethyst (28)</i>	149	INSULIN	107	ATELVIA	137
AMICAR.....	72	APIDRA U-100 INSULIN.	107	<i>atenolol</i>	64
<i>amikacin</i>	9	ALENZIN	48	<i>atenolol-chlorthalidone</i>	64
<i>amiloride</i>	63	APOKYN	32	ATIVAN.....	49
<i>amiloride-hydrochlorothiazide</i>	63	<i>apomorphine</i>	32	<i>atomoxetine</i>	49
<i>aminocaproic acid</i>	72	<i>apraclonidine</i>	163	ATORVALIQ.....	75
<i>amiodarone</i>	62	<i>aprepitant</i>	121	<i>atorvastatin</i>	75
AMITIZA	121	APRETUDE	2	<i>atovaquone</i>	9
<i>amitriptyline</i>	48	<i>apri</i>	149	<i>atovaquone-proguanil</i>	9
<i>amitriptyline-chlordiazepoxide</i>	48	APRISO	121	ATRALIN.....	85
AMJEVITA(CF)	139	APTENSIO XR	48	<i>atropine</i>	157
AMJEVITA(CF)	139	APTIOM.....	24	ATROPINE SULFATE (PF)	157
AUTOINJECTOR.....	139	APTIVUS	2	ATROVENT HFA.....	167
<i>amlodipine</i>	63	ARAKODA	9	ATTRUBY	78
<i>amlodipine-atorvastatin</i>	75	<i>aranelle (28)</i>	149	AUBAGIO.....	60
<i>amlodipine-benazepril</i>	63	ARANESP (IN	129	<i>aubra</i>	149
<i>amlodipine-olmesartan</i>	63	POLYSORBATE).....	129	<i>aubra eq</i>	149
<i>amlodipine-valsartan</i>	63	ARAVA.....	139	AUGMENTIN.....	12
		ARAZLO.....	85	AUGMENTIN ES-600.....	12
		ARBLI.....	63	AUGMENTIN XR	12
		ARCALYST.....	129	AUGTYRO.....	15

AURANOFIN	139	BAFIERTAM.....	60	<i>betamethasone acet,sod phos</i>	
<i>aurovela 1.5/30 (21)</i>	149	<i>bal-care dha</i>	179	.....	103
<i>aurovela 1/20 (21)</i>	149	BAL-CARE DHA		<i>betamethasone dipropionate</i>	92
<i>aurovela 24 fe</i>	149	ESSENTIAL.....	179	<i>betamethasone valerate</i>	92
<i>aurovela fe 1.5/30 (28)</i>	149	BALCOLTRA	149	<i>betamethasone, augmented</i> ...92	
<i>aurovela fe 1-20 (28)</i>	149	<i>balsalazide</i>	121	BETAPACE	62
AURYXIA	177	BALVERSA.....	16	BETAPACE AF	62
AUSTEDO	35	<i>balziva (28)</i>	149	BETASERON.....	60
AUSTEDO XR.....	35	BANZEL	25	<i>betaxolol</i>	64, 157
AUSTEDO XR TITRATION		BAQSIMI.....	106	<i>bethanechol chloride</i>	176
KT(WK1-4).....	36	BARACLUDGE.....	2	BETHKIS	9
AUVELITY.....	49	BASAGLAR KWIKPEN U-		BETIMOL	157
AUVI-Q.....	164	100 INSULIN	107	BETOPTIC S.....	157
AVALIDE	64	BASAGLAR TEMPO PEN(U-		BEVESPI AEROSPHERE .	167
AVAPRO	64	100)INSLN.....	107	<i>bexarotene</i>	16
<i>avar</i>	85	BAXDELA.....	12	BEXSERO	133
AVAR LS.....	85	<i>bayer low dose aspirin</i>	43	BEYAZ.....	149
AVAR-E.....	85	BCG VACCINE, LIVE (PF)		BEYFORTUS.....	2
AVEED	111	.....	133	<i>bicalutamide</i>	16
<i>aviane</i>	149	BD INTEGRA NEEDLE ..	106	BICILLIN L-A	12
<i>avidoxy</i>	13	BD MICROTAINER		BIDIL	64
AVIDOXY DK	13	LANCET	106	BIJUVA.....	144
AVMAPKI-FAKZYNJA	16	BD SPECIALTY USE		BIKTARVY	2
AVODART	175	NEEDLES	106	BILTRICIDE.....	9
AVONEX	60	BELBUCA	39	<i>bimatoprost</i>	160
<i>ayuna</i>	149	<i>belladonna alkaloids-opium</i>		BIMZELX	79
AYVAKIT.....	16	.....	119	BIMZELX AUTOINJECTOR	
AZASAN.....	16	BELSOMRA	49	.....	79
AZASITE	156	<i>benazepril</i>	64	BINOSTO.....	137
<i>azathioprine</i>	16	<i>benazepril-hydrochlorothiazide</i>		BIOTHRAX	133
<i>azelaic acid</i>	85	.....	64	<i>bismuth subcit k-metronidz-tcn</i>	
<i>azelastine</i>	100, 158	BENICAR	64	.....	127
<i>azelastine-fluticasone</i>	167	BENICAR HCT	64	<i>bisoprolol fumarate</i>	64
AZELEX	85	BENLYSTA.....	139	BISOPROLOL FUMARATE	
AZILECT	32	BENZAMYCIN	85	.....	64
<i>azithromycin</i>	8	<i>benzepro</i>	85	<i>bisoprolol-hydrochlorothiazide</i>	
AZMIRO	111	BENZEPRO		.....	64
AZOPT	160	(MICROSPHERES).....	85	<i>blisovi 24 fe</i>	149
AZOR.....	64	BENZNIDAZOLE	9	<i>blisovi fe 1.5/30 (28)</i>	149
AZSTARYS	49	<i>benzonatate</i>	165	<i>blisovi fe 1/20 (28)</i>	149
AZULFIDINE	121	<i>benzoyl peroxide</i>	85	BONJESTA	121
AZULFIDINE EN-TABS ..	121	<i>benztropine</i>	32	BONSITY	137
<i>azurette (28)</i>	149	<i>bepotastine besilate</i>	158	BOOSTRIX TDAP.....	133
B		BEPREVE	158	<i>bosentan</i>	167
<i>b complex 100</i>	179	<i>besser</i>	92	BOSULIF	16
<i>bacitracin</i>	156	BESIVANCE.....	156	<i>bp 10-1</i>	85
<i>bacitracin-polymyxin b</i>	156	BESREMI.....	132	BRAFTOVI	16
<i>baclofen</i>	37, 38	BETADINE OPHTHALMIC		BREATHERITE MDI	
BACLOFEN.....	37	PREP	156	SPACER.....	174
BACTRIM.....	13	<i>betaine</i>	121	BRENZAVVY	114
BACTRIM DS.....	13			BREO ELLIPTA	167

BREXAFEMME	1	<i>calcipotriene</i>	79	CARNITOR (SUGAR-FREE)	97
<i>breyna</i>	167	CALCIPOTRIENE.....	79	.....	97
BREZTRI AEROSPHERE	167	<i>calcipotriene-betamethasone</i>	80	CAROSPIR.....	65
<i>brillyn</i>	149	<i>calcitonin (salmon)</i>	111	<i>carteolol</i>	157
BRILINTA	72	<i>calcitriol</i>	80, 111	<i>cartia xt</i>	65
<i>brimonidine</i>	85, 163	<i>calcium acetate(phosphat bind)</i>	.....	<i>carvedilol</i>	65
<i>brimonidine-timolol</i>	160	.....	177	<i>carvedilol phosphate</i>	65
<i>brinzolamide</i>	160	CALQUENCE		CASODEX	16
BRIVIACT	25	(ACALABRUTINIB MAL)		CATAPRES-TTS-1	65
BROMFED DM	165	.....	16	CATAPRES-TTS-2	65
<i>bromfenac</i>	159	<i>camila</i>	144	CATAPRES-TTS-3	65
<i>bromocriptine</i>	32	<i>camrese</i>	149	CAYA CONTOURED	143
<i>brompheniramine-pseudoeph-</i>		<i>camrese lo</i>	149	CAYSTON	9
<i>dm</i>	165	CAMZYOS	78	<i>caziant (28)</i>	150
BROMSITE.....	160	CANASA.....	121	<i>cefaclor</i>	7
BRONCHITOL	167	<i>candesartan</i>	64	<i>cefadroxil</i>	7
BROVANA	167	<i>candesartan-</i>		<i>cefazolin</i>	7
BRUKINSA	16	<i>hydrochlorothiazid</i>	64	<i>cefdinir</i>	7
BRYHALI	92	<i>capecitabine</i>	16	<i>cefixime</i>	7
BUCAPSOL	49	CAPEX.....	92	<i>cefpodoxime</i>	7
<i>budesonide</i>	121, 168	CAPLYTA.....	49	<i>cefprozil</i>	7
<i>budesonide-formoterol</i>	168	CAPRELSA.....	16	<i>ceftriaxone</i>	7
<i>bumetanide</i>	64	<i>captopril</i>	64	<i>cefuroxime axetil</i>	7
BUPHENYL.....	97	<i>captopril-hydrochlorothiazide</i>		CELEBREX	43
<i>buprenorphine</i>	39	.....	64	<i>celecoxib</i>	43
<i>buprenorphine hcl</i>	39	CAPVAXIVE.....	133	CELEXA	49
<i>buprenorphine-naloxone</i>	43	CARAC	83	CELLCEPT	16
<i>bupropion hcl</i>	49	CARAFATE.....	127	CELONTIN	25
BUPROPION HCL	49	CARBAGLU	97	CENTANY	89
<i>bupropion hcl (smoking deter)</i>		<i>carbamazepine</i>	25	CENTANY AT	89
.....	99	CARBAMAZEPINE	25	<i>cephalexin</i>	7
<i>bupirone</i>	49	CARBATROL.....	25	CEQUA	158
<i>butalbital-acetaminop-caf-cod</i>		<i>carbidopa</i>	32	CERDELGA.....	111
.....	39	<i>carbidopa-levodopa</i>	32	CERVIDIL	147
<i>butalbital-acetaminophen</i>	39	<i>carbidopa-levodopa-</i>		<i>cetirizine</i>	164
<i>butalbital-acetaminophen-caff</i>		<i>entacapone</i>	32	CETRAXAL.....	102
.....	39, 40	<i>carbinoxamine maleate</i>	164	<i>cevimeline</i>	97
<i>butalbital-aspirin-caffeine</i>	40	CARBINOXAMINE		CHANTIX	100
<i>butorphanol</i>	43	MALEATE.....	164	CHANTIX CONTINUING	
BUTRANS	40	CARDIZEM	65	MONTH BOX	100
BYDUREON BCISE	114	CARDIZEM CD.....	64	CHANTIX STARTING	
BYLVAY	121	CARDIZEM LA.....	64	MONTH BOX	100
BYSTOLIC	64	CARDURA	65	<i>charlotte 24 fe</i>	150
C		CARDURA XL	65	<i>chateal eq (28)</i>	150
CABENUVA.....	2	<i>carglumic acid</i>	97	CHEMET.....	97
<i>cabergoline</i>	111	<i>carisoprodol</i>	38	CHENODAL	121
CABLIVI.....	72	<i>carisoprodol-aspirin</i>	38	<i>chlordiazepoxide hcl</i>	49
CABOMETYX.....	16	<i>carisoprodol-aspirin-codeine</i>		<i>chlordiazepoxide-clidinium</i>	119
CABTREO	85	.....	38	<i>chlorhexidine gluconate</i>	100
CADUET.....	75	CARNITOR.....	97	<i>chloroquine phosphate</i>	9
<i>caffeine citrate</i>	97			<i>chlorpromazine</i>	49

<i>chlorthalidone</i>	65	CLINDACIN PAC	85	COMETRIQ	16
<i>chlorzoxazone</i>	38	CLINDAGEL	85	COMIRNATY 2024-25 (12Y UP)(PF).....	133
CHOLBAM.....	121	<i>clindamycin hcl</i>	9	COMPACT SPACE CHAMBER	174
<i>cholestyramine (with sugar)</i> ..	75	<i>clindamycin pediatric</i>	9	COMPAZINE.....	122
<i>cholestyramine light</i>	75	<i>clindamycin phosphate</i> ..	85, 147	COMPLERA	3
CIBINQO	83	<i>clindamycin-benzoyl peroxide</i>	86	<i>complete natal dha</i>	179
<i>ciclodan</i>	90	<i>clindamycin-tretinoin</i>	86	<i>compro</i>	122
CICLODAN KIT.....	90	CLINDESSE	147	CONCEPT DHA	179
<i>ciclopirox</i>	90	CLINPRO 5000.....	100	CONCEPT OB	179
<i>ciclopirox-ure-camph-menth- euc</i>	90	<i>clobazam</i>	25	CONCERTA.....	50
<i>cilostazol</i>	72	<i>clobetasol</i>	92, 93	CONDYLOX.....	83
CILOXAN.....	156	CLOBETASOL	92, 162	CONJUPRI	65
CIMDUO.....	3	<i>clobetasol-emollient</i>	93	CONSENSI.....	65
<i>cimetidine</i>	128	CLOBEX	93	<i>constulose</i>	122
<i>cimetidine hcl</i>	127	<i>clocortolone pivalate</i>	93	CONTOUR NEXT TEST STRIPS	105
CIMZIA.....	122	<i>clodan</i>	93	CONTOUR PLUS TEST STRIP	105
CIMZIA POWDER FOR RECONST.....	121	CLODAN KIT.....	93	CONTOUR TEST STRIPS	105
<i>cinacalcet</i>	111	<i>clomipramine</i>	49	CONZIP.....	43
CIPRO	12	<i>clonazepam</i>	25	COPAXONE	60
CIPRO HC.....	102	<i>clonidine</i>	65	COPIKTRA	16
<i>ciprofloxacin</i>	12	<i>clonidine hcl</i>	49, 65	CORDRAN TAPE LARGE ROLL.....	93
<i>ciprofloxacin hcl</i> ... 12, 102, 156		CLONIDINE HCL	65	COREG.....	65
<i>ciprofloxacin-dexamethasone</i>	102	<i>clopidogrel</i>	72	COREG CR	65
CIPROFLOXACIN- FLUOCINOLONE	102	<i>clorazepate dipotassium</i>	50	CORLANOR	78
<i>citalopram</i>	49	<i>clotrimazole</i>	1, 90	CORTANE-B	83
CITALOPRAM.....	49	<i>clotrimazole-betamethasone</i> ..	90	CORTEF	103
CITRANATAL B-CALM (FE GLUC).....	179	<i>clozapine</i>	50	CORTENEMA	122
CITRANATAL MEDLEY ..	179	CLOZARIL	50	CORTIFOAM.....	122
<i>claravis</i>	85	<i>c-nate dha</i>	179	<i>cortisone</i>	103
CLARINEX.....	164	COARTEM	9	CORTISPORIN-TC	102
CLARINEX-D 12 HOUR ..	165	COBENFY	50	CORTROPHIN GEL.....	103
<i>clarithromycin</i>	8	COBENFY STARTER PACK	50	COSENTYX.....	80
<i>clearlax</i>	122	<i>codeine sulfate</i>	40	COSENTYX (2 SYRINGES)	80
<i>clemastine</i>	164	<i>codeine-butalbital-asa-caff</i> ..	40	COSENTYX PEN	80
CLENIA PLUS	85	<i>codeine-guaifenesin</i>	165	COSENTYX PEN (2 PENS)	80
CLENPIQ	122	CODITUSSIN AC.....	165	COSENTYX UNOREADY PEN.....	80
CLEOCIN.....	147	CODITUSSIN DAC.....	165	COSOPT	160
CLEOCIN HCL.....	9	COLAZAL	122	COSOPT (PF).....	160
CLEOCIN PEDIATRIC.....	9	<i>colchicine</i>	137	COTELLIC.....	16
CLEOCIN T	85	COLCRYS.....	137	COTEMPLA XR-ODT	50
CLIMARA	144	<i>colesevelam</i>	75	<i>covaryx</i>	144
CLIMARA PRO.....	144	COLESTID.....	75	<i>covaryx h.s.</i>	144
<i>clindacin</i>	85	<i>colestipol</i>	75	COXANTO.....	43
<i>clindacin etz</i>	85	<i>colistin (colistimethate na)</i>	9	COZAAR.....	65
CLINDACIN ETZ.....	85	COLY-MYCIN M PARENTERAL	9		
<i>clindacin p</i>	85	COMBIGAN	160		
		COMBIPATCH.....	144		
		COMBIVENT RESPIMAT	168		

CRENESSITY.....	111	DAPAGLIFLOZIN		<i>desmopressin</i>	111, 112
CREON	122	PROPANEDIOL	114	DESMOPRESSIN	112
CRESEMBA	1	<i>dapsone</i>	9, 86	<i>desog-e.estradiol/e.estradiol</i>	
CRESTOR.....	76	DAPSONE.....	86	.....	150
CREXONT	32	DAPTACEL (DTAP		<i>desonide</i>	93
CRINONE	144	PEDIATRIC) (PF).....	133	DESOWEN.....	93
<i>cromolyn</i>	122, 158, 168	DARAPRIM.....	9	<i>desoximetasone</i>	93
<i>crotan</i>	96	<i>darifenacin</i>	175	DESOXYN	50
<i>cryselle (28)</i>	150	DARTISLA	119	DESVENLAFAXINE	50
CTEXTLI.....	122	<i>darunavir</i>	3	<i>desvenlafaxine succinate</i>	50
CUPRIMINE.....	140	<i>dasatinib</i>	17	<i>dexabliss</i>	103
CUVPOSA	119	<i>dasetta 1/35 (28)</i>	150	<i>dexamethasone</i>	103
CUVRIOR.....	97	<i>dasetta 7/7/7 (28)</i>	150	<i>dexamethasone intensol</i>	103
<i>cyanocobalamin (vitamin b-12)</i>		DAURISMO.....	17	<i>dexamethasone sodium phos</i>	
.....	179	DAYBUE	36	(pf)	103
<i>cyclobenzaprine</i>	38	DAYPRO.....	43	<i>dexamethasone sodium</i>	
CYCLOGYL	158	<i>daysee</i>	150	<i>phosphate</i>	103, 162
CYCLOMYDRIL.....	163	DAYTRANA.....	50	<i>dexchlorpheniramine maleate</i>	
<i>cyclopentolate</i>	158	DAYVIGO	50	.....	164
<i>cyclophosphamide</i>	16	DDAVP	111	DEXCOM G6 SENSOR.....	105
CYCLOPHOSPHAMIDE....	16	<i>deblitane</i>	144	DEXCOM G6	
<i>cycloserine</i>	9	<i>deferasirox</i>	97	TRANSMITTER.....	105
CYCLOSET	114	<i>deferiprone</i>	97	DEXCOM G7 SENSOR.....	105
<i>cyclosporine</i>	17, 158	<i>deflazacort</i>	103	DEXEDRINE SPANSULE ..	50
<i>cyclosporine modified</i>	16, 17	DELESTROGEN	144	DEXILANT	128
CYLTEZO(CF)	140	DELSTRIGO.....	3	<i>dexlansoprazole</i>	128
CYLTEZO(CF) PEN.....	140	<i>demeclocycline</i>	13	<i>dexmethylphenidate</i>	50
CYLTEZO(CF) PEN		DEM SER.....	65	DEXTENZA	162
CROHN'S-UC-HS.....	140	DENAVIR.....	92	<i>dextroamphetamine sulfate</i> ...50	
CYLTEZO(CF) PEN		DENGVAXIA (PF).....	133	<i>dextroamphetamine-</i>	
PSORIASIS-UV	140	<i>denta 5000 plus</i>	100	<i>amphetamine</i>	51
<i>cyproheptadine</i>	164	<i>denta 5000 plus sensitive</i> ...100		DHIVY	32
<i>cyred</i>	150	<i>dentagel</i>	100	DIACOMIT	25
<i>cyred eq</i>	150	DEPAKOTE.....	25	<i>diazepam</i>	25, 51
CYSTADANE.....	122	DEPAKOTE ER.....	25	<i>diazepam intensol</i>	51
CYSTADROPS.....	158	DEPAKOTE SPRINKLES ..25		<i>diazoxide</i>	106
CYSTAGON	176	DEPEN TITRATABS	140	DIBENZYLINE	65
CYSTARAN	158	DEPO-ESTRADIOL	144	<i>dichlorphenamide</i>	36
CYTOMEL.....	117	DEPO-PROVERA.....	144	DICLEGIS.....	122
CYTOTEC	128	DEPO-SUBQ PROVERA 104		DICLOFENAC EPOLAMINE	
D		.....	144	.....	43
<i>dabigatran etexilate</i>	72	DEPO-TESTOSTERONE..	111	<i>diclofenac potassium</i>	43
<i>dalfampridine</i>	36	<i>dermacinrx lidocan</i>	89	<i>diclofenac sodium</i> ...43, 83, 160	
DALIRESP.....	168	DERMA-SMOOTH/FS		DICLOFENAC	
<i>danazol</i>	111	BODY OIL.....	93	SUBMICRONIZED	43
DANTRIUM	38	DERMA-SMOOTH/FS		<i>diclofenac-misoprostol</i>	44
<i>dantrolene</i>	38	SCALP OIL	93	<i>dicloxacillin</i>	12
DANZITEN.....	17	DERMOTIC OIL	102	<i>dicyclomine</i>	119
DAPAGLIFLOZ		DESCOVY	3	DIFFERIN	86
PROPANED-METFORMIN		<i>desipramine</i>	50	DIFICID	8
.....	114	<i>desloratadine</i>	164	<i>diflorasone</i>	93

DIFLUCAN.....	1	<i>doxycycline monohydrate</i>	13,	EDURANT	3
<i>diflunisal</i>	44	14		EDURANT PED	3
<i>difluprednate</i>	162	<i>doxylamine-pyridoxine (vit b6)</i>		<i>eemt</i>	144
<i>digoxin</i>	72	.....	122	<i>eemt hs</i>	144
<i>dihydroergotamine</i>	33, 34	DRIZALMA SPRINKLE.....	51	<i>efavirenz</i>	3
DILANTIN.....	26	<i>dronabinol</i>	122	<i>efavirenz-emtricitabin-tenofov3</i>	
DILANTIN EXTENDED	25	<i>drospirenone-e.estradiol-lm.fa</i>		<i>efavirenz-lamivu-tenofov disop</i>	
DILANTIN INFATABS	25	.....	150	.....	3
DILANTIN-125	26	<i>drospirenone-ethinyl estradiol</i>		<i>effer-k</i>	177
DILAUDID	40	.....	150	EFFER-K.....	177
<i>diltiazem</i>	65, 66	DROXIA	17	EFFEXOR XR.....	51
<i>dilt-xr</i>	66	<i>droxidopa</i>	97	EFFIENT	72
<i>dimethyl fumarate</i>	60, 61	DRYSOL DAB-O-MATIC ..	83	EFUDEX	83
DIOVAN	66	DSUVIA.....	40	ELEPSIA XR.....	26
DIOVAN HCT	66	DUAKLIR PRESSAIR	168	ELESTRIN	144
DIPENTUM	122	DUAVEE.....	144	<i>eletriptan</i>	34
DIPHEN	164	DUETACT	114	ELIDEL	83
<i>diphenoxylate-atropine</i>	119	DULERA.....	168	ELIMITE	96
DIPROLENE		<i>duloxetine</i>	51	<i>elinest</i>	150
(AUGMENTED).....	93	DUOBRII	93	ELIQUIS.....	73
<i>dipyridamole</i>	72	DUPIXENT PEN	83	ELIQUIS DVT-PE TREAT	
DISALCID	44	DUPIXENT SYRINGE.....	83	30D START.....	73
<i>diskets</i>	40	DUREX AVANTI BARE		<i>elite-ob</i>	179
<i>disopyramide phosphate</i>	62	REAL FEEL	143	ELIXOPHYLLIN	168
<i>disulfiram</i>	97	DUREX TROPICAL		ELLA.....	150
DIURIL	66	CONDOM	143	ELMIRON.....	176
<i>divalproex</i>	26	DUREZOL	162	<i>eltrombopag olamine</i>	73
DIVIGEL.....	144	<i>dutasteride</i>	175	<i>eluryng</i>	147
<i>dodex</i>	179	<i>dutasteride-tamsulosin</i>	175	ELYXYB.....	34
<i>dofetilide</i>	62	DUVYZAT.....	97	EMEND.....	122
DOJOLVI.....	179	DYANAVEL XR	51	EMFLAZA	103
<i>dolishale</i>	150	DYMISTA.....	168	EMGALITY PEN.....	34
DOLOBID.....	44	DYRENIUM	66	EMGALITY SYRINGE.....	34
<i>donepezil</i>	36	E		EMPAVELI.....	97
DONNATAL.....	119	<i>e.e.s. 400</i>	8	EMROSI	14
DOPTELET.....	72	E.E.S. GRANULES.....	8	EMSAM	51
DORAL	51	EASIVENT HOLDING		<i>emtricitabine</i>	3
DORYX.....	13	CHAMBER	174	<i>emtricitabine-tenofovir (tdf)</i> ...	3
DORYX MPC	13	EBGLYSS PEN.....	83	<i>emtricitabine-tenofovir (tdf)</i> ...	3
<i>dorzolamide</i>	160	EBGLYSS SYRINGE	83	EMTRIVA	3
DORZOLAMIDE (PF)	160	EC-NAPROSYN	44	EMVERM.....	10
<i>dorzolamide-timolol</i>	160	<i>econazole nitrate</i>	90	<i>emzahn</i>	144
<i>dorzolamide-timolol (pf)</i>	160	<i>econtra ez</i>	150	<i>enalapril maleate</i>	66
<i>dotti</i>	144	<i>econtra one-step</i>	150	<i>enalapril-hydrochlorothiazide</i>	
DOVATO	3	<i>ecotrin low strength</i>	44	.....	66
<i>doxazosin</i>	66	ECOZA.....	90	ENBRACE HR.....	179
<i>doxepin</i>	51, 83	EDARBI	66	ENBREL.....	140
<i>doxercalciferol</i>	112	EDARBYCLOR.....	66	ENBREL MINI	140
<i>doxycycline hyclate</i>	13	EDECIN.....	66	ENBREL SURECLICK	140
DOXYCYCLINE HYCLATE		EDLUAR.....	51	ENDARI	97
.....	13	<i>ed-spaz</i>	119	<i>endocet</i>	40

ENGERIX-B (PF).....	133	<i>ery-tab</i>	8	EVOXAC	97
ENGERIX-B PEDIATRIC		ERY-TAB.....	8	EVRYSDI.....	36
(PF).....	133	<i>erythrocin (as stearate)</i>	8	EXELDERM	90
<i>enilloring</i>	147	<i>erythromycin</i>	8, 156	EXELON PATCH.....	36
<i>enoxaparin</i>	73	<i>erythromycin ethylsuccinate</i> ...8		<i>exemestane</i>	17
<i>enpresse</i>	150	<i>erythromycin with ethanol</i> ...86		<i>exenatide</i>	115
ENSACOVE.....	17	<i>erythromycin-benzoyl peroxide</i>		EXFORGE.....	66
<i>enskyce</i>	150	.....	86	EXFORGE HCT.....	66
ENSPRYNG.....	17	ERZOFRI	51	EXJADE	97
ENSTILAR.....	80	ESBRIET	168	EXTENCILLINE	12
<i>entacapone</i>	32	<i>escitalopram oxalate</i>	51	EXTINA	90
ENTADFI.....	176	<i>eslicarbazepine</i>	26	EYSUVIS	162
<i>entecavir</i>	3	<i>esomeprazole magnesium</i> ...128		EZALLOR SPRINKLE.....	76
ENTRESTO	78	<i>estarylla</i>	150	<i>ezetimibe</i>	76
ENTRESTO SPRINKLE	78	<i>estazolam</i>	51	EZETIMIBE-	
ENTYVIO PEN.....	122	ESTRACE	145	ROSUVASTATIN	76
<i>enulose</i>	122	<i>estradiol</i>	145	<i>ezetimibe-simvastatin</i>	76
ENVARUSUS XR	17	<i>estradiol valerate</i>	145	F	
EOHILIA.....	122	<i>estradiol-norethindrone acet</i>		FA-8.....	179
EPANED	66	.....	145	FABHALTA	97
EPCLUSA	3	ESTRATEST F.S.	145	FABIOR	86
EPIDIOLEX	26	ESTRATEST H.S.....	145	<i>falmina (28)</i>	150
EPIDUO FORTE.....	86	ESTRING	145	<i>famciclovir</i>	3
EPIFOAM	80	ESTROGEL.....	145	<i>famotidine</i>	128
<i>epinastine</i>	158	<i>estrogens-methyltestosterone</i>		FANAPT.....	52
<i>epinephrine</i>	164	.....	145	FANAPT TITRATION PACK	
EPINEPHRINE	164	<i>eszopiclone</i>	51	A	52
EPIPEN	164	<i>ethacrynic acid</i>	66	FARESTON	17
EPIPEN JR	164	<i>ethambutol</i>	10	FARXIGA	115
<i>epitol</i>	26	<i>ethosuximide</i>	26	FASENRA	168
EPIVIR	3	<i>ethynodiol diac-eth estradiol</i>		FASENRA PEN	168
<i>eplerenone</i>	66	.....	150	FC2 FEMALE CONDOM .	143
EPOGEN	129	<i>etodolac</i>	44	<i>febuxostat</i>	137
EPRONTIA	26	<i>etonogestrel-ethinyl estradiol</i>		<i>feirza</i>	150
<i>eprosartan</i>	66	.....	147	<i>felbamate</i>	26
EPSOLAY	86	<i>etoposide</i>	17	FELBATOL.....	26
EQUETRO	26	<i>etravirine</i>	3	<i>felodipine</i>	66
<i>ergocalciferol (vitamin d2)</i> .179		EUCRISA.....	83	<i>fem ph</i>	147
<i>ergoloid</i>	51	EULEXIN.....	17	FEMARA	17
ERGOMAR.....	34	EURAX	96	FEMCAP	143
<i>ergotamine-caffeine</i>	34	<i>euthyrox</i>	118	FEMLYV.....	150
ERIVEDGE.....	17	EVAMIST	145	FEMRING	145
ERLEADA	17	EVEKEO	52	<i>fenofibrate</i>	76
<i>erlotinib</i>	17	<i>everolimus (antineoplastic)</i> ..17		FENOFIBRATE	76
ERMEZA	118	<i>everolimus</i>		<i>fenofibrate micronized</i>	76
<i>errin</i>	145	(immunosuppressive).....	17	FENOFIBRATE	
ERTACZO	90	EVERSENSE 365		MICRONIZED	76
<i>ery pads</i>	86	TRANSMITTER	105	<i>fenofibrate nanocrystallized</i> .76	
<i>erygel</i>	86	EVISTA.....	137	<i>fenofibric acid</i>	76
ERYPED 200	8	EVOCLIN	86	<i>fenofibric acid (choline)</i>	76
ERYPED 400	8	EVOTAZ.....	3	<i>fenopropfen</i>	44

FENOPROFEN.....	44	FLUORESCEIN-		<i>fraiche 5000</i>	101
FENOPRON.....	44	BENOXINATE	158	FREESTYLE INSULINX..	105
<i>fentanyl</i>	40	<i>fluorescein-proparacaine</i> ...	158	FREESTYLE INSULINX	
FERRIC CITRATE.....	177	<i>fluoride (sodium)</i>	100, 180	TEST STRIPS	105
FERRIPROX.....	97, 98	FLUORIDEX DAILY		FREESTYLE LIBRE 14 DAY	
FERRIPROX (2 TIMES A		DEFENSE	101	SENSOR.....	105
DAY).....	97	FLUORIDEX SENSITIVITY		FREESTYLE LIBRE 2 PLUS	
<i>fesoterodine</i>	175	RELIEF	101	SENSOR.....	105
FETZIMA.....	52	FLUORIMAX 5000	101	FREESTYLE LIBRE 2	
FEXMID.....	38	FLUORIMAX 5000		SENSOR.....	105
FIASP FLEXTOUCH U-100		SENSITIVE.....	101	FREESTYLE LIBRE 3 PLUS	
INSULIN.....	107	<i>fluorometholone</i>	162	SENSOR.....	105
FIASP PENFILL U-100		<i>fluorouracil</i>	83	FREESTYLE LIBRE 3	
INSULIN.....	107	FLUOROURACIL	83	SENSOR.....	105
FIASP PUMPCART	107	<i>flouxetine</i>	52	FREESTYLE LITE STRIPS	
FIASP U-100 INSULIN.....	107	<i>fluphenazine hcl</i>	52	.....	105
FIBRICOR	76	<i>flurandrenolide</i>	94	FREESTYLE TEST	105
FILSPARI.....	78	<i>flurazepam</i>	52	FROVA.....	34
FINACEA.....	86	<i>flurbiprofen</i>	44	<i>frovatriptan</i>	34
<i>finasteride</i>	176	<i>flurbiprofen sodium</i>	160	FRUZAQLA	17
<i>fingolimod</i>	61	FLUTICASONE FUROATE-		FULPHILA.....	130
FINTEPLA	26	VILANTEROL.....	168	FURADANTIN	14
<i>finzala</i>	150	<i>fluticasone propionate</i> ..	94, 169	<i>furosemide</i>	67
FIORICET	40	FLUTICASONE		FUZEON	3
FIORICET WITH CODEINE		PROPIONATE	168, 169	<i>fyavolv</i>	145
.....	40	<i>fluticasone propion-salmeterol</i>		FYCOMPA.....	26
FIRAZYR.....	168	.....	169	FYLNETRA	130
FIRDAPSE	36	FLUTICASONE PROPION-		G	
FIRVANQ	15	SALMETEROL.....	169	<i>g tussin ac</i>	165
<i>flac otic oil</i>	102	<i>fluvastatin</i>	76	<i>gabapentin</i>	26
FLAREX	162	<i>fluvoxamine</i>	52	GABARONE.....	26
<i>flavoxate</i>	175	FML FORTE	162	GALAFOLD.....	112
<i>flecainide</i>	62	FML LIQUIFILM	162	<i>galantamine</i>	36
FLECTOR.....	44	FOCALIN.....	52	<i>galbriela</i>	150
FLEQSUVY	38	FOCALIN XR	52	<i>gallifrey</i>	145
FLEXICHAMBER.....	174	<i>folic acid</i>	180	GALZIN	177
FLOLIPID	76	<i>folivane-ob</i>	180	GARDASIL 9 (PF).....	133
FLOMAX	176	<i>fondaparinux</i>	73	GASTROCROM	123
FLORIVA (FLUORIDE-		FORFIVO XL.....	52	<i>gatifloxacin</i>	156
VITAMIN D3)	180	<i>formoterol fumarate</i>	169	GATTEX 30-VIAL	123
<i>flotrex</i>	180	FORTEO	137	<i>gavilyte-c</i>	123
<i>fluconazole</i>	1	FOSAMAX	137	<i>gavilyte-g</i>	123
<i>flucytosine</i>	1	FOSAMAX PLUS D.....	138	<i>gavilyte-n</i>	123
<i>fludrocortisone</i>	103	<i>fosamprenavir</i>	3	GAVRETO	17
FLUMADINE	3	<i>fosfomycin tromethamine</i>	14	<i>gefitinib</i>	17
<i>flunisolide</i>	168	<i>fosinopril</i>	67	GELCLAIR	101
<i>fluocinolone</i>	93, 94	<i>fosinopril-hydrochlorothiazide</i>		<i>gemfibrozil</i>	76
<i>fluocinolone acetone oil</i> ..	102	.....	67	<i>gemmily</i>	151
<i>fluocinolone and shower cap</i>	93	FOSRENOL	177	GEMTESA	175
<i>fluocinonide</i>	94	FOTIVDA	17	<i>generlac</i>	123
<i>fluocinonide-e</i>	94	FRAGMIN.....	73	<i>gengraf</i>	17

GENOTROPIN	131	GUARDIAN LINK 3		HULIO(CF) PEN.....	140
GENOTROPIN MINIQUICK		TRANSMITTER	105	HUMALOG JUNIOR	
.....	131	GUARDIAN SENSOR 3 ...	105	KWIKPEN U-100	107
<i>gentamicin</i>	10, 89, 156	GVOKE	106	HUMALOG KWIKPEN	
<i>gentle laxative (mag hydrox)</i>		GVOKE HYPOPEN 2-PACK		INSULIN	108
.....	123	.....	106	HUMALOG MIX 50-50	
GENVOYA	4	GVOKE PFS 2-PACK		KWIKPEN.....	108
GEODON	52	SYRINGE.....	106	HUMALOG MIX 75-25	
GILENYA	61	GYNAZOLE-1	147	KWIKPEN.....	108
GILOTRIF.....	17	H		HUMALOG MIX 75-25(U-	
GIMOTI	123	HADLIMA	140	100)INSULN	108
<i>glatiramer</i>	61	HADLIMA PUSH TOUCH	140	HUMALOG TEMPO PEN(U-	
<i>glatopa</i>	61	HADLIMA(CF).....	140	100)INSULN	108
GLEEVEC.....	18	HADLIMA(CF)		HUMALOG U-100 INSULIN	
GLEOSTINE.....	18	PUSH TOUCH	140	.....	108
<i>glimepiride</i>	115	HAEGARDA.....	169	HUMATIN	10
GLIMEPIRIDE	115	<i>hailey</i>	151	HUMATROPE	131
<i>glipizide</i>	115	<i>hailey 24 fe</i>	151	HUMIRA (ONLY NDCS	
GLIPIZIDE.....	115	<i>hailey fe 1.5/30 (28)</i>	151	STARTING WITH 00074)	
<i>glipizide-metformin</i>	115	<i>hailey fe 1/20 (28)</i>	151	.....	140
GLOPERBA.....	137	<i>halcinonide</i>	94	HUMIRA PEN (ONLY NDCS	
GLUCAGON (HCL)		HALCION	52	STARTING WITH 00074)	
EMERGENCY KIT	106	HALDOL DECANOATE	53	.....	140
<i>glucagon emergency kit</i>		<i>halobetasol propionate</i>	94	HUMIRA(CF) (ONLY NDCS	
(<i>human</i>)	106	<i>haloette</i>	147	STARTING WITH 00074)	
GLUCOCARD SHINE TEST		HALOG	94	.....	141
STRIPS.....	105	<i>haloperidol</i>	53	HUMIRA(CF) PEN (ONLY	
GLUCOCARD VITAL		<i>haloperidol decanoate</i>	53	NDCS STARTING WITH	
SENSOR.....	105	<i>haloperidol lactate</i>	53	00074).....	141
<i>glutamine (sickle cell)</i>	98	HARVONI.....	4	HUMIRA(CF) PEN	
<i>glyburide</i>	115	HAVRIX (PF)	133	CROHNS-UC-HS (ONLY	
<i>glyburide micronized</i>	115	<i>heather</i>	146	NDCS STARTING WITH	
<i>glyburide-metformin</i>	115	HEMADY	103	00074).....	141
GLYCATE	119	HEMANGEOL.....	67	HUMIRA(CF) PEN PSOR-	
<i>glycopyrrolate</i>	119	HEMICLOR.....	67	UV-ADOL HS (ONLY	
GLYXAMBI	115	HEMLIBRA	73	NDCS STARTING WITH	
GOCOVRI.....	32	<i>hemmorex-hc</i>	123	00074).....	141
GOLYTELY.....	123	<i>hep flush-10 (pf)</i>	73	HUMULIN 70/30 U-100	
GOMEKLI	18	<i>heparin (porcine)</i>	73	INSULIN	108
GONITRO	79	<i>heparin lock flush (porcine)</i> .	73	HUMULIN 70/30 U-100	
GRALISE	26	<i>heparin lockflush(porcine)(pf)</i>		KWIKPEN.....	108
<i>granisetron hcl</i>	123	.....	73	HUMULIN N NPH INSULIN	
GRANIX	130	<i>heparin, porcine (pf)</i>	73, 74	KWIKPEN.....	108
GRASTEK	133	HEPLISAV-B (PF).....	133	HUMULIN N NPH U-100	
<i>griseofulvin microsize</i>	1	HETLIOZ	53	INSULIN	108
<i>griseofulvin ultramicrosize</i>	1	HETLIOZ LQ.....	53	HUMULIN R REGULAR U-	
<i>guanfacine</i>	52, 67	HIBERIX (PF).....	133	100 INSULN	108
GUARDIAN 4 GLUCOSE		HISTEX-AC.....	165	HUMULIN R U-500 (CONC)	
SENSOR.....	105	<i>homatropaire</i>	158	INSULIN	108
GUARDIAN 4		HORIZANT.....	36	HUMULIN R U-500 (CONC)	
TRANSMITTER.....	105	HULIO(CF).....	140	KWIKPEN.....	108

HYCAMTIN	18	<i>icatibant</i>	169	INSULIN DEGLUDEC.....	109
HYCODAN (WITH		<i>iclevia</i>	151	INSULIN GLARGINE U-300	
HOMATROPINE)	165	ICLUSIG	18	CONC	109
<i>hydralazine</i>	67	<i>icosapent ethyl</i>	76	INSULIN GLARGINE-YFGN	
HYDREA	18	IDHIFA	18	.....	109
<i>hydrochlorothiazide</i>	67	ILARIS (PF).....	130	INSULIN LISPRO	109
<i>hydrocodone bitartrate</i>	40	ILEVRO	160	INSULIN LISPRO	
<i>hydrocodone-acetaminophen</i>	40	ILUMYA	80	PROTAMIN-LISPRO	109
<i>hydrocodone-</i>		<i>imatinib</i>	18	INSULIN SYRINGE-	
<i>chlorpheniramine</i>	165	IMBRUVICA	18	NEEDLE U-100	106
<i>hydrocodone-homatropine</i> .	165	IMCIVREE.....	96	INTELENCE	4
<i>hydrocodone-ibuprofen</i>	40	<i>imipramine hcl</i>	53	INTRAROSA	147
<i>hydrocortisone</i>	94, 103, 123	<i>imipramine pamoate</i>	53	INTUNIV ER	53
<i>hydrocortisone acetate</i>	123	<i>imiquimod</i>	83	INVEGA	53
<i>hydrocortisone butyrate</i>	94	IMITREX	34	INVEGA HAFYERA	53
<i>hydrocortisone valerate</i>	94	IMITREX STATDOSE PEN34		INVEGA SUSTENNA	53
<i>hydrocortisone-acetic acid</i> .	102	IMITREX STATDOSE		INVEGA TRINZA	53
<i>hydrocortisone-pramoxine</i> ..	80,	REFILL	34	INVELTYS.....	162
123		IMKELDI.....	18	INVOKAMET.....	115
HYDROCORTISONE-		IMOVAX RABIES VACCINE		INVOKAMET XR	115
PRAMOXINE	123	(PF).....	133	INVOKANA.....	115
<i>hydromet</i>	165	IMPAVIDO	10	INZIRQO.....	67
<i>hydromorphone</i>	40, 41	IMPOYZ.....	94	IODOFLEX	83
<i>hydroxocobalamin</i>	180	IMURAN.....	18	IODOSORB.....	83
<i>hydroxychloroquine</i>	10	IMVEXXY MAINTENANCE		IOPIDINE.....	163
<i>hydroxyurea</i>	18	PACK	146	IPOL	133
<i>hydroxyzine hcl</i>	164	IMVEXXY STARTER PACK		<i>ipratropium bromide</i> ..	101, 169
<i>hydroxyzine pamoate</i>	164	.....	146	<i>ipratropium-albuterol</i>	169
HYFTOR.....	83	INBRIJA.....	32	IQIRVO	123
HYMPAVZI PEN	74	<i>incassia</i>	146	<i>irbesartan</i>	67
<i>hyoscyamine sulfate</i>	119	INCRELEX	98	<i>irbesartan-hydrochlorothiazide</i>	
<i>hyosyne</i>	119	INCRUSE ELLIPTA.....	169	.....	67
HYPHER-SAL.....	169	<i>indapamide</i>	67	IRESSA	18
HYRIMOZ PEN CROHN'S-		INDERAL LA	67	ISENTRESS	4
UC STARTER.....	141	INDERAL XL	67	ISENTRESS HD	4
HYRIMOZ PEN PSORIASIS		INDOCIN	44	<i>isibloom</i>	151
STARTER.....	141	<i>indomethacin</i>	44	<i>isoniazid</i>	10
HYRIMOZ(CF).....	141	INFANRIX (DTAP) (PF)...	133	ISORDIL	79
HYRIMOZ(CF) PEDI		INGREZZA	36	ISORDIL TITRADOSE	79
CROHN STARTER	141	INGREZZA INITIATION		<i>isosorbide dinitrate</i>	79
HYRIMOZ(CF) PEN	141	PK(TARDIV).....	36	<i>isosorbide mononitrate</i>	79
HYSINGLA ER	41	INGREZZA SPRINKLE	36	<i>isosorbide-hydralazine</i>	67
HYZAAR	67	INLYTA	18	<i>isotretinoin</i>	86
I		INNOPRAN XL	67	<i>isradipine</i>	67
<i>ibandronate</i>	138	INPEFA	115	ISTALOL	157
IBRANCE	18	INQOVI.....	18	ISTURISA	112
IBSRELA	123	INREBIC	18	ITOVEBI	18
IBTROZI.....	18	INSPIRA.....	67	<i>itraconazole</i>	1
<i>ibu</i>	44	INSULIN ASP PRT-INSULIN		<i>ivabradine</i>	78
<i>ibuprofen</i>	44	ASPART.....	108	<i>ivermectin</i>	10, 86
<i>ibuprofen-famotidine</i>	44	INSULIN ASPART U-100	109	IWILFIN.....	18

IXCHIQ (PF).....	134	<i>kelnor 1/35 (28)</i>	151	LABELTALOL.....	68
IXIARO (PF).....	134	<i>kelnor 1/50 (28)</i>	151	<i>lacosamide</i>	27
IYUZEH (PF).....	161	KENALOG.....	94, 103	<i>lactated ringers</i>	96
J		KEPPRA.....	27	<i>lactulose</i>	123
JADENU	98	KEPPRA XR	27	LAMICTAL	27
JADENU SPRINKLE	98	KERENDIA.....	67	LAMICTAL ODT	27
<i>jaimiess</i>	151	KESIMPTA PEN	61	LAMICTAL ODT STARTER	
JAKAFI.....	18	<i>ketoconazole</i>	1, 91	(BLUE).....	27
JALYN	176	<i>ketodan</i>	91	LAMICTAL ODT STARTER	
<i>jantoven</i>	74	<i>ketodan kit</i>	91	(GREEN).....	27
JANUMET	115	<i>ketoprofen</i>	44	LAMICTAL ODT STARTER	
JANUMET XR.....	115	<i>ketorolac</i>	44, 45, 160	(ORANGE).....	27
JANUVIA.....	115	KEVEYIS.....	36	LAMICTAL STARTER	
JARDIANCE.....	115	KEVZARA.....	141	(BLUE) KIT	27
<i>jasmiel (28)</i>	151	KHINDIVI.....	103	LAMICTAL STARTER	
JATENZO	112	KINERET	141	(GREEN) KIT	27
<i>javygtor</i>	112	KINRIX (PF).....	134	LAMICTAL STARTER	
JAYPIRCA.....	18	<i>kiprofen</i>	45	(ORANGE) KIT	27
<i>jencycla</i>	146	KISQALI.....	18	LAMICTAL XR.....	27
JENTADUETO	115	KITABIS PAK	10	LAMICTAL XR STARTER	
JENTADUETO XR.....	115	KLARON	89	(BLUE).....	27
<i>jinteli</i>	146	<i>klayesta</i>	91	LAMICTAL XR STARTER	
JOENJA.....	98	KLISYRI (250 MG).....	19	(GREEN).....	28
<i>jolessa</i>	151	KLONOPIN.....	27	LAMICTAL XR STARTER	
JORNAY PM	53	<i>klor-con</i>	178	(ORANGE).....	28
JOURNAVX	44	<i>klor-con 10</i>	178	<i>lamivudine</i>	4
<i>joyeaux</i>	151	<i>klor-con 8</i>	178	<i>lamivudine-zidovudine</i>	4
JUBBONTI.....	138	<i>klor-con m10</i>	178	<i>lamotrigine</i>	28
JUBLIA	90	<i>klor-con m15</i>	178	LAMPIT	10
<i>juleber</i>	151	<i>klor-con m20</i>	178	LANCETS	106
JULUCA.....	4	<i>klor-con/ef</i>	178	LANOXIN.....	72
<i>junel 1.5/30 (21)</i>	151	KLOXXADO	45	<i>lanreotide</i>	19
<i>junel 1/20 (21)</i>	151	KONVOMEPI	128	<i>lansoprazole</i>	128
<i>junel fe 1.5/30 (28)</i>	151	KORLYM.....	112	<i>lanthanum</i>	178
<i>junel fe 1/20 (28)</i>	151	KOSELUGO	19	LANTUS SOLOSTAR U-100	
<i>junel fe 24</i>	151	KOSHER PRENATAL PLUS		INSULIN	109
JUST RIGHT 5000.....	101	IRON	180	LANTUS U-100 INSULIN	109
JUXTAPID.....	76	<i>kourzeq</i>	101	<i>lapatinib</i>	19
JYLAMVO.....	18	K-PHOS NO 2.....	176	<i>larin 1.5/30 (21)</i>	151
JYNARQUE.....	112	K-PHOS ORIGINAL	176	<i>larin 1/20 (21)</i>	151
JYNNEOS (PF).....	134	KRAZATI	19	<i>larin 24 fe</i>	151
K		KRINTAFEL.....	10	<i>larin fe 1.5/30 (28)</i>	152
<i>kaitlib fe</i>	151	KRISTALOSE.....	123	<i>larin fe 1/20 (28)</i>	152
KALETRA	4	<i>kurvelo (28)</i>	151	LASIX	68
<i>kalliga</i>	151	KUVAN.....	112	<i>latanoprost</i>	161
KALYDECO.....	169	KYLEENA	143	LATUDA.....	53
KAPSPARGO SPRINKLE ..	67	KYZATREX	112	<i>laxative peg 3350</i>	123
KARBINAL ER	164	L		LAZCLUZE	19
<i>kariva (28)</i>	151	<i>l norgest/e.estradiol-e.estradiol</i>		LEDIPASVIR-SOFOSBUVIR	
KATERZIA.....	67	.....	151	.....	4
KAZANO	115	<i>labetalol</i>	67	<i>leena 28</i>	152

<i>leflunomide</i>	141	<i>lidocaine viscous</i>	89	<i>lopinavir-ritonavir</i>	4
<i>lenalidomide</i>	19	<i>lidocaine-hydrocortison-aloe</i>	124	LOPRESSOR	68
LENVIMA	19	<i>lidocaine-prilocaine</i>	89	LOPROX (AS OLAMINE) ..	91
LEQSELVI	141	LIDOCAINE-TETRACAINE	89	LOPROX KIT	91
LESCOL XL	76	<i>lidocan iii</i>	89	<i>lorazepam</i>	54
<i>lessina</i>	152	<i>lidocan iv</i>	89	<i>lorazepam intensol</i>	54
LETAIRIS	169	<i>lidocan v</i>	89	LORBRENA	19
<i>letrozole</i>	19	<i>lidocort</i>	89	LOREEV XR	54
<i>leucovorin calcium</i>	15	LIDODERM	89	<i>loryna (28)</i>	152
LEUKERAN	19	LIKMEZ	10	LORZONE	38
LEUKINE	130	LILETTA	143	<i>losartan</i>	68
<i>leuprolide</i>	19	<i>linezolid</i>	10	<i>losartan-hydrochlorothiazide</i>	68
<i>levabuterol hcl</i>	169	LINZESS	124	LOTEMAX	162
LEVALBUTEROL TARTRATE	169	<i>liothyronine</i>	118	LOTEMAX SM	162
LEVAMLODIPINE	68	LIPITOR	76	LOTENSIN	68
LEVBID	120	LIPOFEN	76	LOTENSIN HCT	68
<i>levetiracetam</i>	28	<i>liraglutide</i>	116	<i>loteprednol etabonate</i> ..	162, 163
LEVETIRACETAM	28	<i>lisdexamfetamine</i>	53	LOTREL	68
<i>levobunolol</i>	157	<i>lisinopril</i>	68	LOTRONEX	124
<i>levocarnitine</i>	98	<i>lisinopril-hydrochlorothiazide</i>	68	<i>lovastatin</i>	77
<i>levocarnitine (with sugar)</i> ...	98	LITEAIRE MDI CHAMBER	174	LOVAZA	77
<i>levocetirizine</i>	164	<i>lithium carbonate</i>	53, 54	LOVENOX	74
<i>levofloxacin</i>	13, 156	<i>lithium citrate</i>	54	<i>low-ogestrel (28)</i>	152
<i>levonest (28)</i>	152	LITHOBID	54	<i>loxapine succinate</i>	54
<i>levonorgest-eth.estradiol-iron</i>	152	LITHOSTAT	98	<i>lo-zumandimine (28)</i>	152
<i>levonorgestrel</i>	152	LIVALO	76	<i>lubiprostone</i>	124
<i>levonorgestrel-ethinyl estrad</i>	152	LIVDELZI	124	LUCEMYRA	45
<i>levonorg-eth estrad triphasic</i>	152	LIVMARLI	124	<i>ludent fluoride</i>	180
<i>levora-28</i>	152	LIVTENCITY	4	<i>lugols</i>	89, 178
<i>levorphanol tartrate</i>	41	LO LOESTRIN FE	152	LULICONAZOLE	91
<i>levo-t</i>	118	LODINE	45	LUMAKRAS	19
<i>levothyroxine</i>	118	LODOCO	78	LUMIGAN	161
LEVOTHYROXINE	118	LODOSYN	32	LUMRYZ	54
<i>levoxyl</i>	118	LOESTRIN 1.5/30 (21)	152	LUMRYZ STARTER PACK	54
LEVSIN	120	LOESTRIN 1/20 (21)	152	LUNESTA	54
LEVSIN/SL	120	LOESTRIN FE 1.5/30 (28- DAY)	152	LUPKYNIS	19
LEXAPRO	53	LOESTRIN FE 1/20 (28-DAY)	152	<i>lurasidone</i>	54
LIALDA	123	<i>lofena</i>	45	<i>lutra (28)</i>	152
LIBRAX (WITH CLIDINIUM)	120	<i>lofexidine</i>	45	LUZU	91
LICART	45	<i>lojaimiess</i>	152	LYBALVI	54
<i>lidocaine</i>	89	LOKELMA	178	<i>lyleq</i>	146
<i>lidocaine hcl</i>	89	LOMOTIL	120	<i>lyllana</i>	146
<i>lidocaine hcl-hydrocortison ac</i>	89, 123, 124	LONSURF	19	LYNPARZA	19
LIDOCAINE HCL- HYDROCORTISON AC124		<i>loperamide</i>	120	LYRICA	28
		LOPID	77	LYRICA CR	28
				LYSODREN	19
				LYTGObI	19
				LYUMJEV KWIKPEN U-100 INSULIN	109

LYUMJEV KWIKPEN U-200 INSULIN.....	109	MECOBALAMIN (VITAMIN B12).....	180	<i>methoxsalen</i>	83
LYUMJEV TEMPO PEN(U- 100)INSULN.....	109	MEDROL.....	104	<i>methscopolamine</i>	120
LYUMJEV U-100 INSULIN	110	MEDROL (PAK).....	104	<i>methsuximide</i>	28
<i>lyza</i>	146	<i>medroxyprogesterone</i>	146	<i>methyl dopa</i>	68
M		<i>mefenamic acid</i>	45	<i>methyl dopa- hydrochlorothiazide</i>	68
MACROBID.....	14	<i>mefloquine</i>	10	<i>methylergonovine</i>	156
<i>mafenide acetate</i>	89	<i>megestrol</i>	19	METHYLIN.....	54
MALARONE.....	10	MEKINIST.....	19, 20	<i>methylphenidate</i>	55
MALARONE PEDIATRIC .	10	MEKTOVI.....	20	<i>methylphenidate hcl</i>	54, 55
<i>malathion</i>	96	<i>meleya</i>	146	METHYLPHENIDATE HCL	55
<i>maraviroc</i>	4	<i>meloxicam</i>	45	<i>methylprednisolone</i>	104
MAR-COF CG.....	165	MELOXICAM.....	45	<i>methylprednisolone acetate</i>	104
MARINOL.....	124	<i>meloxicam submicronized</i>	45	<i>methyltestosterone</i>	112
<i>marlissa (28)</i>	152	<i>memantine</i>	36	<i>metoclopramide hcl</i>	124
MARNATAL-F.....	180	MEMANTINE.....	36	<i>metolazone</i>	68
MARPLAN.....	54	<i>memantine-donepezil</i>	36	METOPIRONONE.....	98
MATULANE.....	19	MENEST.....	146	<i>metoprolol succinate</i>	68
<i>matzim la</i>	68	MENOSTAR.....	146	<i>metoprolol ta-hydrochlorothiaz</i>	68
MAVENCLAD (10 TABLET PACK).....	61	MENQUADFI (PF).....	134	<i>metoprolol tartrate</i>	68
MAVENCLAD (4 TABLET PACK).....	61	MENVEO A-C-Y-W-135-DIP (PF).....	134	METROCREAM.....	86
MAVENCLAD (5 TABLET PACK).....	61	<i>mepidine</i>	41	METROGEL.....	86
MAVENCLAD (6 TABLET PACK).....	61	<i>meprobamate</i>	38	<i>metronidazole</i>	10, 86, 147
MAVENCLAD (7 TABLET PACK).....	61	MEPRON.....	10	METRONIDAZOLE.....	10
MAVENCLAD (8 TABLET PACK).....	61	<i>mercaptopurine</i>	20	<i>metyrosine</i>	68
MAVENCLAD (9 TABLET PACK).....	61	<i>merzee</i>	152	<i>mexiletine</i>	62
MAVYRET.....	4	<i>mesalamine</i>	124	MIACALCIN.....	112
MAXALT.....	34	<i>mesalamine with cleansing wipe</i>	124	<i>mibelas 24 fe</i>	152
MAXALT-MLT.....	34	MESNEX.....	15	MICARDIS.....	68
MAXIDEX.....	163	MESTINON.....	38	MICARDIS HCT.....	68
MAXITROL.....	161	MESTINON TIMESPAN....	38	MICONAZOLE NITRATE- ZINC OX-PET.....	91
<i>maxi-tuss ac</i>	165	METADATE CD.....	54	<i>miconazole-3</i>	148
MAXI-TUSS CD.....	165	<i>metaxalone</i>	38	MICROCHAMBER.....	174
MAYZENT.....	61	METAXALONE.....	38	<i>microgestin 1.5/30 (21)</i>	152
MAYZENT STARTER(FOR 1MG MAINT).....	61	<i>metformin</i>	116	<i>microgestin 1/20 (21)</i>	153
MAYZENT STARTER(FOR 2MG MAINT).....	61	METFORMIN.....	116	<i>microgestin fe 1.5/30 (28)</i> ...	153
<i>mb caps</i>	176	<i>methadone</i>	41	<i>microgestin fe 1/20 (28)</i>	153
<i>meclizine</i>	124	<i>methadose</i>	41	MICROSPACER.....	174
<i>meclofenamate</i>	45	<i>methamphetamine</i>	54	<i>midazolam</i>	55
		<i>methazolamide</i>	160	<i>midodrine</i>	98
		<i>methenamine hippurate</i>	14	MIEBO (PF).....	158
		<i>methenamine mandelate</i>	14	<i>mifepristone</i>	112
		<i>methen-sod phos-meth blue- hyos</i>	176	<i>migergot</i>	34
		<i>methimazole</i>	104	<i>miglitol</i>	116
		METHITEST.....	112	<i>miglustat</i>	112
		<i>methocarbamol</i>	38	MIGRANAL.....	34
		<i>methotrexate sodium</i>	20	<i>mili</i>	153
		<i>methotrexate sodium (pf)</i>	20	<i>millipred</i>	104

<i>millipred dp</i>	104	<i>mycophenolate mofetil</i>	20	NEFFY	165
<i>mimvey</i>	146	<i>mycophenolate sodium</i>	20	NEMLUVIO.....	20
MINIVELLE	146	MYDAYIS	55	<i>neomycin</i>	10
<i>minocycline</i>	14	MYDRIACYL.....	158	<i>neomycin-bacitracin-poly-hc</i>	
MINOCYCLINE.....	14	MYFEMBREE	148	.....	161
<i>minoxidil</i>	68	MYFORTIC	20	<i>neomycin-bacitracin-</i>	
<i>minzoya</i>	153	MYHIBBIN.....	20	<i>polymyxin</i>	156
MIPLYFFA	36	MYLERAN	20	<i>neomycin-polymyxin b gu</i>	96
<i>mirabegron</i>	175	<i>mynatal</i>	180	<i>neomycin-polymyxin b-</i>	
MIRCERA.....	130	<i>mynatal plus</i>	180	<i>dexameth</i>	161
MIRENA	143	<i>mynatal-z</i>	180	<i>neomycin-polymyxin-</i>	
<i>mirtazapine</i>	55	MYRBETRIQ	175	<i>gramicidin</i>	156
MIRVASO	86	MYSOLINE	28	<i>neomycin-polymyxin-hc</i>	102,
<i>misoprostol</i>	128	MYTESI.....	120	161	
MITIGARE	137	N		NEONATAL COMPLETE	181
MIUDELLA	143	<i>nabumetone</i>	45	NEONATAL FE.....	181
M-M-R II (PF).....	134	<i>nadolol</i>	68	NEONATAL PLUS	
<i>m-natal plus</i>	180	<i>naftifine</i>	91	VITAMIN.....	181
<i>modafinil</i>	55	NAFTIN	91	NEONATAL-DHA	181
<i>moexipril</i>	68	NALFON.....	45	<i>neo-polycin</i>	156
<i>molindone</i>	55	NALOCET	41	<i>neo-polycin hc</i>	161
<i>mometasone</i>	94, 95, 170	<i>naloxone</i>	45	NEORAL.....	20
<i>mondoxyne nl</i>	14	<i>naltrexone</i>	45	NEO-SYNALAR.....	90
<i>mono-linyah</i>	153	NAMENDA TITRATION		NEO-SYNALAR KIT	90
<i>montelukast</i>	170	PAK.....	37	<i>neo-vital rx</i>	181
MORGIDOX 1X 50	14	NAMENDA XR.....	37	NERLYNX.....	20
MORGIDOX 1X100	14	NAMZARIC.....	37	NESINA	116
<i>morphine</i>	41	NAPRELAN CR	45	NESTABS	181
<i>morphine concentrate</i>	41	NAPROSYN	45	NESTABS ABC	181
MOTEGRITY	124	<i>naproxen</i>	45	NESTABS DHA.....	181
MOTOFEN.....	120	<i>naproxen sodium</i>	45	NESTABS ONE	181
MOTPOLY XR.....	28	<i>naproxen-esomeprazole</i>	46	<i>neuac</i>	86
MOUNJARO.....	116	<i>naratriptan</i>	34	NEUAC KIT	86
MOVANTIK	124	NARCAN	46	NEULASTA	130
MOVIPREP.....	124	NARDIL.....	55	NEULASTA ONPRO	130
MOXATAG	12	NASCOBAL	180	NEUPOGEN.....	130
<i>moxifloxacin</i>	13, 156	NATACYN	156	NEUPRO	33
MOZOBIL.....	130	NATAL PNV	180	NEURONTIN.....	29
MRESVIA (PF).....	134	NATAZIA	153	NEVANAC.....	160
MS CONTIN	41	<i>nateglinide</i>	116	<i>nevirapine</i>	4
MUGARD.....	101	NATESTO.....	112	<i>new day</i>	153
MULPLETA.....	74	NATROBA.....	96	<i>newgen</i>	181
MULTAQ.....	62	NAYZILAM.....	28	NEXAVAR.....	20
<i>multi-vitamin with fluoride</i> .	180	<i>nebivolol</i>	68	NEXICLON XR	69
<i>mupirocin</i>	90	NEBUPENT	10	NEXIUM	128
<i>mupirocin calcium</i>	89	<i>nebusal</i>	170	NEXIUM PACKET.....	128
<i>mvc-fluoride</i>	180	NEBUSAL.....	170	NEXLETOL	77
<i>my choice</i>	153	<i>necon 0.5/35 (28)</i>	153	NEXLIZET	77
<i>my way</i>	153	NEEVODHA (WITH ALGAL		NEXOBRID	96
MYALEPT	112	OIL).....	180	NEXPLANON.....	148
MYCAPSSA	20	<i>nefazodone</i>	55	NEXTSTELLIS.....	153

NGENLA	131	<i>norgestimate-ethinyl estradiol</i>		<i>nystatin-triamcinolone</i>	91
<i>niacin</i>	77	.....	153	<i>nystop</i>	91
NIACOR.....	77	NORITATE	87	NYVEPRIA	130
<i>nicardipine</i>	69	NORLIQVA	69	O	
<i>nicotine</i>	100	NORPACE	63	OB COMPLETE	181
<i>nicotine (polacrilex)</i>	100	NORPACE CR.....	62	OB COMPLETE ONE	181
NICOTROL NS.....	100	NORTHERA	98	OB COMPLETE PETITE ..	181
<i>nifedipine</i>	69	<i>nortrel 0.5/35 (28)</i>	153	OB COMPLETE PREMIER	
<i>nikki (28)</i>	153	<i>nortrel 1/35 (21)</i>	153	.....	181
NILANDRON	20	<i>nortrel 1/35 (28)</i>	153	OB COMPLETE WITH DHA	
<i>nilotinib hcl</i>	20	<i>nortrel 7/7/7 (28)</i>	153	.....	181
<i>nilutamide</i>	20	<i>nortriptyline</i>	55	OCALIVA	125
<i>nimodipine</i>	69	NORVASC.....	69	<i>ocella</i>	153
NINJACOF-XG	166	NORVIR.....	4	<i>octreotide acetate</i>	20
NINLARO	20	NOURIANZ	33	OCUFLOX	156
<i>nisoldipine</i>	69	NOVOLIN 70-30 FLEXPEN		ODACTRA.....	134
<i>nitazoxanide</i>	10	U-100.....	110	ODEFSEY	5
<i>nitisinone</i>	98	NOVOLIN N FLEXPEN ..	110	ODOMZO.....	21
<i>nitro-bid</i>	79	NOVOLIN R FLEXPEN....	110	OFEV.....	170
NITRO-DUR.....	79	NOVOLOG FLEXPEN U-100		<i>ofloxacin</i>	13, 102, 156
<i>nitrofurantoin</i>	14	INSULIN	110	OGSIVEO.....	21
NITROFURANTOIN.....	14	NOVOLOG MIX 70-30 U-100		OHTUVAYRE	170
<i>nitrofurantoin macrocrystal</i> .	14	INSULN	110	OJEMDA	21
<i>nitrofurantoin monohyd/m-</i>		NOVOLOG MIX 70-		OJJAARA.....	21
<i>cryst</i>	14	30FLEXPEN U-100	110	<i>olanzapine</i>	55
<i>nitroglycerin</i>	79, 124	NOVOLOG PENFILL U-100		<i>olanzapine-fluoxetine</i>	55
NITROLINGUAL.....	79	INSULIN	110	<i>olmesartan</i>	69
NITROMIST	79	NOVOLOG U-100 INSULIN		<i>olmesartan-amlodipin-</i>	
NITROSTAT.....	79	ASPART.....	110	<i>hcthiazid</i>	69
<i>nitro-time</i>	79	NOXAFIL	1	<i>olmesartan-</i>	
NITYR.....	98	<i>np thyroid</i>	118	<i>hydrochlorothiazide</i>	69
<i>niva thyroid</i>	118	NUBEQA	20	<i>olopatadine</i>	101, 159
NIVESTYM	130	NUCALA	170	OLPRUVA	98
<i>nizatidine</i>	128	NUCORT.....	95	OLUMIANT.....	141
<i>nora-be</i>	146	NUCYNTA	46	OLUX	95
NORDITROPIN FLEXPEN		NUCYNTA ER	46	OMECLAMOX-PAK.....	128
.....	131	NUEDEXTA	37	<i>omega-3 acid ethyl esters</i>	77
<i>norelgestromin-ethin.estradiol</i>		NULEV	120	<i>omeprazole</i>	128
.....	148	NUPLAZID.....	55	<i>omeprazole-sodium</i>	
<i>noreth-ethinyl estradiol-iron</i>		NURTEC ODT.....	34	<i>bicarbonate</i>	128
.....	153	NUTROPIN AQ NUSPIN..	132	OMNARIS.....	170
<i>norethindrone (contraceptive)</i>		NUVARING.....	148	OMNIPOD 5 (G6/LIBRE 2	
.....	146	NUVESSA.....	148	PLUS).....	106
<i>norethindrone acetate</i>	146	NUVIGIL	55	OMNIPOD 5 G6-G7 INTRO	
<i>norethindrone ac-eth estradiol</i>		NUZYRA	14	KT(GEN5).....	106
.....	146, 153	<i>nyamyc</i>	91	OMNIPOD 5 G6-G7 PODS	
<i>norethindrone-e.estradiol-iron</i>		<i>nylia 1/35 (28)</i>	153	(GEN 5)	107
.....	153	<i>nylia 7/7/7 (28)</i>	153	OMNIPOD 5	
NORGESIC.....	38	NYMALIZE	69	INTRO(G6/LIBRE2PLUS)	
NORGESIC FORTE	38	NYPOZI	130	.....	106
		<i>nystatin</i>	1, 91		

OMNIPOD DASH INTRO	ORENITRAM MONTH 3	PALFORZIA (LEVEL 0)..134
KIT (GEN 4) 107	TITRATION KT 69	PALFORZIA (LEVEL 1)..134
OMNIPOD DASH PODS	ORFADIN 98	PALFORZIA (LEVEL 2)..134
(GEN 4)..... 107	ORGOVYX 21	PALFORZIA (LEVEL 3)..134
OMNITROPE..... 132	ORIAHNN..... 148	PALFORZIA (LEVEL 4)..134
OMVOH..... 125	ORLISSA 112	PALFORZIA (LEVEL 5)..134
OMVOH PEN 125	ORKAMBI 170	PALFORZIA (LEVEL 6)..134
<i>ondansetron</i> 125	ORLADEYO 170	PALFORZIA (LEVEL 7)..134
ONDANSETRON..... 125	<i>ormarvi</i> 37	PALFORZIA (LEVEL 8)..134
<i>ondansetron hcl</i> 125	<i>orphenadrine citrate</i> 38	PALFORZIA (LEVEL 9)..135
<i>ondansetron hcl (pf)</i> 125	<i>orphenadrine-asa-caffeine</i> ... 38	PALFORZIA (LEVEL 10).135
<i>onelax magnesium citrate</i> ... 125	<i>orphengesic forte</i> 38	PALFORZIA INITIAL (1-3
ONETOUCH ULTRA TEST	ORSERDU 21	YRS)..... 135
..... 105	<i>oscimin</i> 120	PALFORZIA INITIAL (4-17
ONETOUCH VERIO TEST	<i>oscimin sl</i> 120	YRS)..... 135
STRIPS..... 105	<i>oseltamivir</i> 5	PALFORZIA LEVEL 11
ONEXTON..... 87	OSENI 116	MAINTENANCE..... 135
ONFI..... 29	OSPHENA..... 148	<i>paliperidone</i> 56
ONGENTYS 33	OTEZLA 141	PALYNZIQ 112
ONUREG 21	OTEZLA STARTER..... 142	PAMELOR 56
ONYDA XR..... 55	OTOVEL 102	PANCREAZE..... 125
ONZETRA XSAIL 34	OTREXUP (PF) 142	PANDEL 95
<i>opcicon one-step</i> 154	OTULFI..... 80	PANRETIN 84
OPFOLDA 112	OVACE 80	<i>pantoprazole</i> 128
OPILL..... 146	OVACE PLUS 80	PARAGARD T 380A..... 143
OPIPZA..... 56	OVACE PLUS SHAMPOO. 80	<i>paricalcitol</i> 112
<i>opium tincture</i> 120	OVACE PLUS WASH..... 80	PARNATE..... 56
OPSUMIT 170	OVIDE..... 96	<i>paroex oral rinse</i> 101
OPSYNVI..... 170	<i>oxaprozin</i> 46	<i>paroxetine hcl</i> 56
OPTICHAMBER DIAMOND	OXAPROZIN..... 46	<i>paroxetine</i>
VHC 174	<i>oxazepam</i> 56	<i>mesylate(menop.sym)</i> 56
<i>option-2</i> 154	<i>oxcarbazepine</i> 29	PASER..... 10
OPTIUM EZ..... 105	OXERVATE 159	PAXIL 56
OPTIUM TEST 105	<i>oxiconazole</i> 91	PAXIL CR..... 56
OPVEE 46	OXISTAT..... 91	PAXLOVID..... 5
OPZELURA 83	OXTELLAR XR 29	<i>pazopanib</i> 21
ORACEA 14	<i>oxybutynin chloride</i> 175	PEDIARIX (PF) 135
ORACIT 176	OXYBUTYNIN CHLORIDE	PEDVAX HIB (PF)..... 135
ORALAIR..... 134	..... 175	<i>peg 3350-electrolytes</i> 125
<i>oralone</i> 101	<i>oxycodone</i> 41	<i>peg3350-sod sul-nacl-kcl-asb-c</i>
ORAMAGICRX..... 101	OXYCODONE..... 41, 42	..... 125
ORAPRED ODT 104	<i>oxycodone-acetaminophen</i> ... 42	PEGASYS 132
ORAVIG 1	OXYCONTIN 42	<i>peg-electrolyte soln</i> 125
ORENCIA 141	<i>oxymorphone</i> 42	PEMAZYRE..... 21
ORENCIA CLICKJECT... 141	OXYTROL..... 175	PEN NEEDLE, DIABETIC107
ORENITRAM..... 69	OZEMPIC 116	PENBRAYA (PF) 135
ORENITRAM MONTH 1	OZOBAX 38	<i>penciclovir</i> 92
TITRATION KT 69	OZOBAX DS 38	<i>penicillamine</i> 142
ORENITRAM MONTH 2	P	<i>penicillin v potassium</i> 12
TITRATION KT 69	<i>pacerone</i> 63	PENNSAID 46
	PACNEX..... 87	PENTACEL (PF)..... 135

<i>pentamidine</i>	10	<i>pitavastatin calcium</i>	77	PRECISION Q-I-D TEST ..	106
PENTASA.....	125	PLAN B ONE-STEP	154	PRECISION XTRA TEST .	106
<i>pentazocine-naloxone</i>	46	PLAQUENIL.....	10	PRECOSE.....	116
<i>pentoxifylline</i>	74	PLAVIX	74	PRED FORTE	163
PEPCID	128	PLEGRIDY	61, 62	PRED MILD.....	163
<i>perampanel</i>	29	PLENVU	125	<i>prednicarbate</i>	95
PERCOCET	42	PLEXION.....	87	<i>prednisolone</i>	104
PERFOROMIST	170	PLEXION CLEANSING		<i>prednisolone acetate</i>	163
PERIDEX.....	101	CLOTHS	87	PREDNISOLONE ACETATE	
<i>perindopril erbumine</i>	69	PLEXION NS.....	80	(PF).....	163
<i>periogard</i>	101	PLIAGLIS	89	PREDNISOLONE ACETATE-	
<i>permethrin</i>	96	PNEUMOVAX-23	135	BROMFENAC	159
<i>perphenazine</i>	56	<i>pnv-dha</i>	181	PREDNISOLONE ACETATE-	
<i>perphenazine-amitriptyline</i> ..	56	<i>pnv-omega</i>	181	NEPAFENAC.....	159
PERSERIS.....	56	<i>pnv-select</i>	181	<i>prednisolone sodium</i>	
PERTZYE	125	POCKET CHAMBER.....	174	<i>phosphate</i>	104, 163
PHEBURANE.....	98	<i>podofilox</i>	84	<i>prednisone</i>	104
<i>phenazopyridine</i>	177	POKONZA.....	178	<i>prednisone intensol</i>	104
<i>phenelzine</i>	56	<i>polycin</i>	156	<i>pregabalin</i>	29
<i>phenobarb-hyoscy-atropine-</i>		<i>polymyxin b sulf-trimethoprim</i>		PREMARIN	146
<i>scop</i>	120	.....	157	PREMPHASE.....	147
<i>phenobarbital</i>	29	POLY-TUSSIN AC.....	166	PREMPRO	147
<i>phenohydro</i>	120	POMALYST	21	PRENATA.....	181
<i>phenoxybenzamine</i>	69	PONVORY.....	62	<i>prenatabs fa</i>	181
<i>phenylephrine hcl</i>	163	PONVORY 14-DAY		<i>prenatabs rx</i>	182
PHENYTEK.....	29	STARTER PACK.....	62	<i>prenatal plus</i>	182
<i>phenytoin</i>	29	<i>portia 28</i>	154	<i>prenatal plus (calcium carb)</i>	
<i>phenytoin sodium extended</i> ..	29	<i>posaconazole</i>	1	.....	182
PHEXXI	148	<i>potassium chloride</i>	178	PRENATAL PLUS DHA...	182
<i>philith</i>	154	POTASSIUM CHLORIDE	178	PRENATAL PLUS	
PHOSPHOLINE IODIDE..	157	<i>potassium citrate</i>	176	VITAMIN-MINERAL ...	182
PHOTREXA CROSS-		<i>potassium iodide</i>	105	<i>prenatal-u</i>	182
LINKING KIT.....	159	<i>povidone-iodine</i>	157	PRENATE AM.....	182
PHYSIOLYTE	96	PR BENZOYL PEROXIDE.87		PRENATE CHEWABLE...	182
PHYSIOSOL IRRIGATION	96	<i>pr natal 400</i>	181	PRENATE DHA (FERR ASP	
<i>phytonadione (vitamin k1)</i>	74	<i>pr natal 400 ec</i>	181	GLYCIN).....	182
PHYTONADIONE		<i>pr natal 430</i>	181	PRENATE ELITE (IRON ASP	
(VITAMIN K1).....	74	<i>pr natal 430 ec</i>	181	GLYC).....	182
PIFELTRO	5	PRADAXA.....	74	PRENATE ENHANCE.....	182
<i>pilocarpine hcl</i>	101, 158	PRALUENT PEN.....	77	PRENATE	
<i>pimecrolimus</i>	84	<i>pramipexole</i>	33	ESSENTIAL(IRON-ASP-	
<i>pimozide</i>	56	PRAMOSONE	80	GL)	182
<i>pimtree (28)</i>	154	<i>prasugrel hcl</i>	74	PRENATE MINI (FERR ASP	
<i>pindolol</i>	69	<i>pravastatin</i>	77	GLYCIN).....	182
<i>pioglitazone</i>	116	<i>praziquantel</i>	10	PRENATE PIXIE	182
<i>pioglitazone-glimepiride</i>	116	<i>prazosin</i>	69	PRENATE RESTORE	182
<i>pioglitazone-metformin</i>	116	PRECISION PCX PLUS TEST		PRENATE STAR.....	182
PIQRAY	21	.....	105	PREPIDIL.....	148
<i>pirfenidone</i>	170	PRECISION PCX TEST	106	PRESTALIA.....	70
PIRFENIDONE.....	170	PRECISION POINT OF		PRETOMANID.....	11
<i>piroxicam</i>	46	CARE TEST.....	106	PREVACID	129

PREVACID SOLUTAB 129	PROLIA..... 138	QUADRACEL (PF) 135
<i>prevalite</i> 77	PROMACTA..... 74	QUALAQUIN 11
PREVIDENT..... 101	<i>promethazine</i> 165	QUAZEPAM..... 56
PREVIDENT 5000 BOOSTER PLUS 101	<i>promethazine-codeine</i> 166	QUESTRAN..... 77
PREVIDENT 5000 ENAMEL PROTECT 101	<i>promethazine-dm</i> 166	QUESTRAN LIGHT..... 77
PREVIDENT 5000 ORTHO DEFENSE 101	<i>promethazine-phenylephrine</i> 166	<i>quetiapine</i> 56, 57
PREVIDENT 5000 PLUS.. 101	<i>promethegan</i> 165	QUETIAPINE 56
PREVIDENT 5000 SENSITIVE..... 101	PROMETRIUM 147	QUILLICHEW ER 57
PREVIDENT KIDS 101	<i>propafenone</i> 63	QUILLIVANT XR 57
PREVNAR 20 (PF)..... 135	<i>proparacaine</i> 159	<i>quinapril</i> 70
PREVYMIS..... 5	<i>propranolol</i> 70	<i>quinapril-hydrochlorothiazide</i> 70
PREZCOBIX..... 5	<i>propranolol-</i> <i>hydrochlorothiazid</i> 70	<i>quinidine gluconate</i> 63
PREZISTA 5	<i>propylthiouracil</i> 105	<i>quinidine sulfate</i> 63
PRIFTIN..... 11	PROQUAD (PF)..... 135	<i>quinine sulfate</i> 11
PRILOSEC 129	PROSCAR..... 176	<i>quit 2</i> 100
PRIMACARE..... 182	PROTHELIAL 102	<i>quit 4</i> 100
<i>primaquine</i> 11	PROTONIX..... 129	QULIPTA 34
PRIMEAIRE 174	<i>protriptyline</i> 56	QUVIVIQ..... 57
<i>primidone</i> 29	PROVERA 147	QVAR REDHALER 171
PRIMIDONE..... 29	PROVIDA OB..... 182	R
PRIMLEV 42	PROVIGIL 56	RABAVERT (PF) 135
PRIMSOL..... 15	PROZAC 56	<i>rabeprazole</i> 129
PRIORIX (PF)..... 135	<i>prucalopride</i> 126	RABEPRAZOLE 129
PRISTIQ..... 56	<i>prudoxin</i> 84	RADIOGARDASE..... 98
PROAIR RESPICLICK 170	<i>pruradik</i> 96	RAGWITEK..... 135
<i>probenecid</i> 137	PULMICORT 171	RALDESY..... 57
<i>probenecid-colchicine</i> 137	PULMICORT FLEXHALER 170	<i>raloxifene</i> 138
PROCARDIA XL 70	<i>pulmosal</i> 171	<i>ramelteon</i> 57
<i>procentra</i> 56	PULMOZYME..... 171	<i>ramipril</i> 70
PROCHAMBER 174	PURIXAN 21	<i>ranolazine</i> 78
<i>prochlorperazine</i> 125	PYLERA 129	RAPAFLO..... 176
<i>prochlorperazine maleate</i> .. 125	<i>pyrazinamide</i> 11	<i>rasagiline</i> 33
PROCORT 125	PYRIDIDIUM 177	RASUVO (PF)..... 142
PROCRT 130	<i>pyridostigmine bromide</i> .. 38, 39	RAVICTI..... 98
PROCTOCORT 95, 125	PYRIDOSTIGMINE BROMIDE..... 39	RAYALDEE..... 112
PROCTOFOAM HC 125	<i>pyrimethamine</i> 11	RAYOS..... 104
<i>procto-med hc</i> 126	PYRUKYND..... 98	REBIF (WITH ALBUMIN) .62
<i>proctosol hc</i> 126	PYZCHIVA..... 80	REBIF REBIDOSE 62
<i>proctozone-hc</i> 126	Q	REBIF TITRATION PACK. 62
PROCYSBI 176	QBRELIS 70	<i>reclipsen (28)</i> 154
<i>progesterone</i> 147	QBREXZA 84	RECOMBIVAX HB (PF).. 135, 136
<i>progesterone micronized</i> 147	QELBREE 56	RECORLEV 113
PROGLYCEM 106	QFITLIA 74	RECTIV..... 126
PROGRAF 21	QFITLIA PEN..... 74	REGLAN..... 126
<i>prolate</i> 42	QINLOCK..... 21	REGRANEX 84
PROLATE..... 42	QLOSI 158	RELAFEN DS 46
PROLENSA 160	QNASL..... 171	RELAGARD 148

RELEXXII 57
 RELION NOVOLIN 70/30 110
 RELION NOVOLIN N 110
 RELION NOVOLIN R 110
 RELISTOR 126
 RELPAX 34
 RELTONE 126
 REMERON 57
 REMERON SOLTAB 57
 RENACIDIN 176
renthyroid 118
 RENVELA 178
repaglinide 116
 REPATHA PUSHTRONEX 77
 REPATHA SURECLICK ... 77
 REPATHA SYRINGE 77
 RESPA-AR 166
 RESTASIS 159
 RESTASIS MULTIDOSE . 159
 RESTORIL 57
 RETACRIT 131
 RETEVMO 21
 RETIN-A 87
 RETIN-A MICRO 87
 RETIN-A MICRO PUMP ... 87
 RETROVIR 5
 REVATIO 171
 REVLIMID 21
 REVUFORJ 21
 REXTOVY 46
 REXULTI 57
 REYATAZ 5
 REYVOW 34
 REZDIFFRA 98
 REZLIDHIA 21
 REZUROCK 21
 REZVOGLAR KWIKPEN 110
 RHOFADE 87
 RHOPRESSA 161
ribavirin 5
 RIDAURA 142
rifabutin 11
rifampin 11
 RILUTEK 98
riluzole 98
rimantadine 5
ringer's 96
 RINVOQ 142
 RINVOQ LQ 142
 RIOMET 116
risedronate 99, 138

RISPERDAL 57
 RISPERDAL CONSTA 57
risperidone 57
risperidone microspheres 57
 RITALIN 57
 RITALIN LA 57
 RITEFLO AEROCHAMBER
 174
ritonavir 5
rivaroxaban 74
rivastigmine 37
rivastigmine tartrate 37
rivelsa 154
 RIVFLOZA 176
rizatriptan 34
 R-NATAL OB 182
 ROBINUL 120
 ROBINUL FORTE 120
 ROCALTROL 113
 ROCKLATAN 161
roflumilast 171
 ROLVEDON 131
 ROMVIMZA 22
ropinirole 33
rosadan 87
 ROSADAN 87
 ROSULA 87
rosula cleansing cloths 87
rosuvastatin 77
rosyrah 154
 ROSZET 77
 ROTARIX 136
 ROTATEQ VACCINE 136
 ROWASA 126
roweepa 29
 ROXICODONE 42
 ROXYBOND 42
 ROZEREM 57
 ROZLYTREK 22
 RUBRACA 22
rufinamide 30
 RUKOBIA 5
 RYALTRIS 171
 RYBELSUS 116
 RYCLORA 165
 RYDAPT 22
 RYKINDO 58
 RYTARY 33
 RYVENT 165
 RYZNEUTA 131

S
 SABRIL 30
 SAFYRAL 154
sajazir 171
 SALAGEN (PILOCARPINE)
 102
salsalate 46
 SAMSCA 113
 SANCUSO 126
 SANDIMMUNE 22
 SANDOSTATIN 22
 SANTYL 96
 SAPHRIS 58
sapropterin 113
 SAVAYSA 74
 SAVELLA 142
saxagliptin 116
saxagliptin-metformin 116
scalacort 95
 SCEMBLIX 22
scopolamine base 126
 SECUADO 58
 SEGLUROMET 116
 SELARSDI 81
 SELECT-OB 182
 SELECT-OB (FOLIC ACID)
 182
 SELECT-OB + DHA 182
selegiline hcl 33
selenium sulfide 81
 SELZENTRY 5
 SEMGLEE(INSULIN
 GLARGINE-YFGN) 110
 SEMGLEE(INSULIN
 GLARG-YFGN)PEN 110
se-natal 19 183
se-natal 19 chewable 183
 SENSIPAR 113
 SEREVENT DISKUS 171
 SERNIVO 95
 SEROQUEL 58
 SEROQUEL XR 58
 SEROSTIM 132
sertraline 58
 SERTRALINE 58
setlakin 154
sevelamer carbonate 178
sevelamer hcl 178
 SEYSARA 14
sf 102
sf 5000 plus 102

SFROWASA.....	126	SOFOSBUVIR-		STELARA.....	81
<i>sharobel</i>	147	VELPATASVIR.....	5	STEQEYMA.....	81
SHINGRIX (PF).....	136	SOGROYA.....	132	STIMUFEND.....	131
SIGNIFOR.....	22	SOHONOS.....	99	STIOLTO RESPIMAT.....	171
SIKLOS.....	22	<i>solifenacin</i>	175	STIVARGA.....	22
<i>sildenafil (pulm.hypertension)</i>		SOLQUA 100/33.....	110	STOBOCLO.....	138
.....	171	SOLOSEC.....	11	<i>stop smoking aid</i>	100
SILENOR.....	58	SOLTAMOX.....	22	STRENSIQ.....	113
SILIQ.....	81	<i>soluvita</i>	183	STRIBILD.....	6
<i>silodosin</i>	176	<i>soluvita a,c,d with fluoride</i>	183	STRIVERDI RESPIMAT.....	171
SILVADENE.....	82	SOMA.....	39	STROMEKTOL.....	11
<i>silver sulfadiazine</i>	82	SOMATULINE DEPOT.....	22	<i>strong iodine</i>	90, 179
SIMBRINZA.....	161	SOMAVERT.....	113	SUBLOCADE.....	42
SIMLANDI(CF).....	142	SOOLANTRA.....	87	SUBOXONE.....	46
SIMLANDI(CF)		<i>sorafenib</i>	22	<i>subvenite</i>	30
AUTOINJECTOR.....	142	SORBITOL.....	96	<i>subvenite starter (blue) kit</i>	30
<i>simliya (28)</i>	154	SORBITOL-MANNITOL.....	96	<i>subvenite starter (green) kit</i>	30
<i>simpesse</i>	154	SORILUX.....	81	<i>subvenite starter (orange) kit</i>	30
SIMPLERA SENSOR.....	106	<i>sotalol</i>	63	SUCRAID.....	126
SIMPLERA SYNC SENSOR		<i>sotalol af</i>	63	<i>sucralfate</i>	129
.....	106	SOTYKTU.....	81	SUFLAVE.....	126
SIMPONI.....	142	SOTYLIZE.....	63	SULAR.....	70
<i>simvastatin</i>	77	SOVALDI.....	5, 6	SULCONAZOLE.....	91
SINEMET.....	33	SOVUNA.....	11	<i>sulfacetamide sodium</i>	81, 163
SINGULAIR.....	171	SPACE CHAMBER.....	174	<i>sulfacetamide sodium (acne)</i>	90
<i>sirolimus</i>	22	SPEVIGO.....	81	<i>sulfacetamide sodium-sulfur</i>	87, 88
SIRTURO.....	11	SPIKEVAX 2024-2025(12Y		SULFACETAMIDE	
SITAGLIPTIN-METFORMIN		UP)(PF).....	136	SODIUM-SULFUR.....	87, 88
.....	117	<i>spinosad</i>	96	<i>sulfacetamide-prednisolone</i>	163
SIVEXTRO.....	11	SPIRIVA RESPIMAT.....	171	<i>sulfacleanse 8-4</i>	88
SKYCLARYS.....	37	SPIRIVA WITH		<i>sulfadiazine</i>	13
SKYLA.....	143	HANDIHALER.....	171	<i>sulfamethoxazole-trimethoprim</i>	
SKYRIZI.....	81, 126	<i>spironolactone</i>	70	.....	13
SKYTROFA.....	132	<i>spironolacton-</i>		SULFAMYLON.....	90
SLYND.....	154	<i>hydrochlorothiaz</i>	70	<i>sulfasalazine</i>	126
SOAAZ.....	70	SPORANOX.....	2	<i>sulfatrim</i>	13
<i>sodium chlor 0.9% bacteriostat</i>		SPRAVATO.....	58	<i>sulindac</i>	46
.....	99	<i>sprintec (28)</i>	154	SUMADAN.....	88
<i>sodium chloride</i>	99, 171	SPRITAM.....	30	SUMADAN XLT.....	88
<i>sodium chloride 0.9 %</i>	99	SPRIX.....	46	<i>sumatriptan</i>	34
<i>sodium citrate-citric acid</i>	176	SPRYCEL.....	22	<i>sumatriptan succinate</i>	35
<i>sodium fluoride 5000 plus</i>	102	<i>sps (with sorbitol)</i>	178	<i>sumatriptan-naproxen</i>	35
<i>sodium fluoride-pot nitrate</i>	102	<i>sronyx</i>	154	SUMAXIN.....	88
SODIUM OXYBATE.....	58	<i>ssd</i>	82	SUMAXIN CP.....	88
<i>sodium phenylbutyrate</i>	99	SSKI.....	105	SUMAXIN TS.....	88
<i>sodium polystyrene sulfonate</i>		<i>sss 10-5</i>	87	<i>sunitinib malate</i>	22
.....	178	<i>st joseph aspirin</i>	46	SUNLENCA.....	6
<i>sodium,potassium,mag sulfates</i>		<i>st. joseph aspirin</i>	46	SUNOSI.....	58
.....	126	STAMARIL (PF).....	136	SUPREP BOWEL PREP KIT	
SOFDRA.....	84	STEGLATRO.....	117	.....	126
		STEGLUJAN.....	117		

SUTAB.....	126	TARGADOX.....	14	TETRACAINE HCL (PF)..	159
SUTENT.....	22	TARGRETIN	23	<i>tetracycline</i>	14
<i>syeda</i>	154	<i>tarina 24 fe</i>	154	TEXACORT	95
SYMAX DUOTAB.....	120	<i>tarina fe 1/20 (28)</i>	154	TEZSPIRE.....	172
<i>symax fastabs</i>	120	<i>taron-c dha</i>	183	THALITONE	70
<i>symax-sl</i>	120	TARPEYO.....	104	THALOMID.....	23
<i>symax-sr</i>	120	TASCENSO ODT	62	THEO-24	172
SYMBICORT.....	172	TASIGNA	23	<i>theophylline</i>	172
SYMBRAVO	35	<i>tasimelteon</i>	58	THIOLA	99
SYMDEKO	172	TASMAR	33	THIOLA EC	99
SYMFI.....	6	<i>tavaborole</i>	91	<i>thioridazine</i>	58
SYMPAZAN.....	30	TAVALISSE	74	<i>thiothixene</i>	58
SYMPROIC	126	TAVNEOS	99	THRIVITE RX	183
SYMTUZA.....	6	TAYTULLA.....	154	THYQUIDITY	118
SYNALAR.....	95	<i>tazarotene</i>	88	<i>thyroid (pork)</i>	118
SYNALAR CREAM KIT	95	TAZAROTENE.....	88	<i>tiadylt er</i>	70
SYNALAR OINTMENT KIT	95	TAZORAC	88	<i>tiagabine</i>	30
.....	95	TAZVERIK.....	23	TIAZAC	71
SYNALAR TS	95	TECFIDERA	62	TIBSOVO.....	23
SYNAREL	113	TEGLUTIK	99	<i>ticagrelor</i>	74
SYNDROS	126	TEGRETOL	30	TICOVAC	136
SYNJARDY	117	TEGRETOL XR.....	30	TIGLUTIK	99
SYNJARDY XR	117	TEKTURNA	70	TIKOSYN.....	63
SYNTHROID.....	118	<i>telmisartan</i>	70	<i>tilia fe</i>	154
SYPRINE	99	<i>telmisartan-amlodipine</i>	70	<i>timolol</i>	157
T		<i>telmisartan-hydrochlorothiazid</i>	70	<i>timolol maleate</i>	71, 157
TABLOID	22	.....	70	<i>timolol maleate (pf)</i>	157
TABRECTA.....	22	<i>temazepam</i>	58	TIMOPTIC OCUDOSE (PF)	157
TACLONEX	81	TEMBEXA.....	6	.....	157
<i>tacrolimus</i>	22, 84	<i>temozolomide</i>	23	<i>tinidazole</i>	11
<i>tadalafil (pulm. hypertension)</i>	172	<i>tencon</i>	42	<i>tiopronin</i>	99
.....	172	TENIVAC (PF)	136	<i>tiotropium bromide</i>	172
TADLIQ.....	172	<i>tenofovir disoproxil fumarate</i>	6	TIROSINT	118
TAFINLAR.....	22	TENORETIC 100.....	70	TIROSINT-SOL	118
<i>tafluprost (pf)</i>	161	TENORETIC 50.....	70	TIVICAY.....	6
TAGRISSO	23	TENORMIN.....	70	TIVICAY PD.....	6
TAKE ACTION	154	TEPMETKO.....	23	<i>tizanidine</i>	39
TAKHZYRO.....	172	<i>terazosin</i>	70	TLANDO.....	113
TALICIA.....	129	<i>terbinafine hcl</i>	2	TOBI.....	11
TALTZ AUTOINJECTOR ..	81	<i>terbutaline</i>	172	TOBI PODHALER	11
TALTZ AUTOINJECTOR (2	81	<i>terconazole</i>	148	TOBRADEX	162
PACK).....	81	<i>teriflunomide</i>	62	TOBRADEX ST.....	162
TALTZ AUTOINJECTOR (3	81	<i>teriparatide</i>	138	<i>tobramycin</i>	11, 157
PACK).....	81	TERIPARATIDE	138	<i>tobramycin in 0.225 % nacl</i>	11
TALTZ SYRINGE.....	81	TERSI FOAM	81	<i>tobramycin sulfate</i>	11
TALZENNA.....	23	TESTIM.....	113	TOBRAMYCIN WITH	
TAMIFLU	6	<i>testosterone</i>	113	NEBULIZER.....	11
<i>tamoxifen</i>	23	<i>testosterone cypionate</i>	113	<i>tobramycin-dexamethasone</i>	162
<i>tamsulosin</i>	176	<i>testosterone enanthate</i>	113	TOBREX	157
<i>tanlor</i>	39	<i>tetrabenazine</i>	37	<i>tolcapone</i>	33
TAPERDEX.....	104	<i>tetracaine hcl</i>	159	TOLECTIN 600.....	46

<i>tolmetin</i>	46	TREXIMET.....	35	TRUQAP.....	23
TOLSURA.....	2	TREZIX.....	42	TRUSTEX-RIA NON-LUB	
<i>tolterodine</i>	175	<i>triamcinolone acetonide</i>	95,	CONDOMS.....	143
<i>tolvaptan</i>	114	102, 104		TRUVADA.....	6
<i>tolvaptan (polycys kidney dis)</i>		<i>triamterene</i>	71	TRYNGOLZA.....	77
.....	113	<i>triamterene-hydrochlorothiazid</i>		TRYVIO.....	78
TOPAMAX.....	30	.....	71	TUDORZA PRESSAIR.....	173
TOPICORT.....	95	<i>triazolam</i>	58	TUKYSA.....	23
<i>topiramate</i>	30, 31	TRIBENZOR.....	71	<i>tulana</i>	147
TOPIRAMATE.....	30	TRICARE.....	183	TURALIO.....	23
TOPROL XL.....	71	TRICOR.....	77	<i>turqoz (28)</i>	155
<i>toremifene</i>	23	<i>triderm</i>	95	TUXARIN ER.....	166
<i>torpenz</i>	23	<i>trientine</i>	99	TWINRIX (PF).....	136
<i>torse mide</i>	71	TRIENTINE.....	99	TWIRLA.....	148
TOSYMRA.....	35	<i>tri-estarylla</i>	154	TYBLUME.....	155
TOUJEO MAX U-300		<i>trifluoperazine</i>	58	TYBOST.....	6
SOLOSTAR.....	110	<i>trifluridine</i>	157	TYENNE.....	142
TOUJEO SOLOSTAR U-300		<i>trihexyphenidyl</i>	33	TYENNE AUTOINJECTOR	
INSULIN.....	110	TRIJARDY XR.....	117	.....	142
<i>tovet emollient</i>	95	TRIKAFTA.....	172	TYKERB.....	23
TOVIAZ.....	175	<i>tri-legest fe</i>	154	TYMLOS.....	138
TRACLEER.....	172	TRILEPTAL.....	31	TYPHIM VI.....	136
TRADJENTA.....	117	<i>tri-linyah</i>	154	TYRVAYA.....	159
<i>tramadol</i>	47	<i>tri-lo-estarylla</i>	155	TYVASO.....	173
TRAMADOL.....	46, 47	<i>tri-lo-marzia</i>	155	TYVASO DPI.....	173
<i>tramadol-acetaminophen</i>	47	<i>tri-lo-mili</i>	155	TYVASO REFILL KIT.....	173
<i>trandolapril</i>	71	<i>tri-lo-sprintec</i>	155	TYVASO STARTER KIT.....	173
<i>trandolapril-verapamil</i>	71	<i>trimethobenzamide</i>	127	U	
<i>tranexamic acid</i>	148	<i>trimethoprim</i>	15	UBRELVY.....	35
TRANSDERM-SCOP.....	127	<i>tri-mili</i>	155	UCERIS.....	127
<i>tranylcypromine</i>	58	<i>trimipramine</i>	58	UDENYCA.....	131
TRAVATAN Z.....	161	TRIMO-SAN JELLY.....	148	UDENYCA AUTOINJECTOR	
<i>travoprost</i>	161	<i>trinatal rx 1</i>	183	.....	131
<i>trazodone</i>	58	<i>trinate</i>	183	UDENYCA ONBODY.....	131
TRECTOR.....	11	TRINAZ.....	183	ULESFIA.....	96
TRELEGY ELLIPTA.....	172	TRINTELLIX.....	58	ULORIC.....	137
TREMFYA.....	82	<i>tri-sprintec (28)</i>	155	ULTRAVATE.....	95
TREMFYA PEN.....	82	TRISTART DHA.....	183	UMECLIDINIUM-	
TREMFYA PEN		TRIUMEQ.....	6	VILANTEROL.....	173
INDUCTION PK-CROHN		TRIUMEQ PD.....	6	UNDECATREX.....	114
.....	82	<i>tri-vitamin with fluoride</i>	183	<i>unithroid</i>	119
TRESIBA FLEXTOUCH U-		<i>tri-vylibra</i>	155	UPNEEQ (PF).....	163
100.....	111	<i>tri-vylibra lo</i>	155	UPTRAVI.....	71
TRESIBA FLEXTOUCH U-		TROKENDI XR.....	31	URELLE.....	177
200.....	111	<i>tropicamide</i>	158	<i>uretron d-s</i>	177
TRESIBA U-100 INSULIN		<i>tropium</i>	175	URIBEL TABS.....	177
.....	111	TRUDHESA.....	35	<i>urimar-t</i>	177
<i>tretinoin</i>	88	TRUETRACK TEST.....	106	URIMAR-T.....	177
<i>tretinoin (antineoplastic)</i>	23	TRULANCE.....	127	URNEVA.....	177
<i>tretinoin microspheres</i>	88	TRULICITY.....	117	UROCIT-K 10.....	177
TREXALL.....	23	TRUMENBA.....	136	UROCIT-K 15.....	177

<i>urogesic-blue</i>	177	VCF CONTRACEPTIVE GEL	148	VISTOGARD	15
<i>uro-mp</i>	177	.....	148	VITAFOL FE PLUS.....	183
UROQID-ACID NO.2	177	VECAMYL	78	VITAFOL GUMMIES	183
<i>uro-sp</i>	177	VECTICAL	82	VITAFOL ULTRA.....	183
UROXATRAL	176	<i>velivet triphasic regimen (28)</i>	155	VITAFOL-OB	183
URSO FORTE.....	127	.....	155	VITAFOL-OB+DHA	183
<i>ursodiol</i>	127	VELPHORO.....	179	VITAFOL-ONE	183
<i>uryl</i>	177	VELSIPITY	127	VITAMEDMD ONE RX ..	183
USTEKINUMAB.....	82	VELTASSA.....	179	<i>vitamin k</i>	75
USTEKINUMAB-AEKN ...	82	VELTIN.....	88	<i>vitamin k1</i>	75
USTEKINUMAB-TTWE ...	82	VEMLIDY.....	6	<i>vitamins a,c,d and fluoride</i> .	183
UZEDY	59	VENCLEXTA	23	VITRAKVI.....	23
V		VENCLEXTA STARTING		VIVELLE-DOT.....	147
VAFSEO	99	PACK	23	VIVITROL	47
VAGIFEM.....	147	<i>venlafaxine</i>	59	VIVJOA.....	2
<i>valacyclovir</i>	6	VENLAFAXINE BESYLATE	59	VIVLODEX	47
VALCHLOR.....	84	.....	59	VIVOTIF	137
VALCYTE	6	VENTAVIS	173	VIZIMPRO.....	24
<i>valganciclovir</i>	6	VENTOLIN HFA.....	173	VOGELXO.....	114
VALIUM.....	59	<i>venxxiva</i>	99	<i>volnea (28)</i>	155
<i>valproic acid</i>	31	VEOZAH.....	148	VONJO	24
<i>valproic acid (as sodium salt)</i>	31	<i>verapamil</i>	71	VOQUEZNA.....	129
.....	31	VERDESO.....	96	VOQUEZNA DUAL PAK.	129
<i>valsartan</i>	71	VEREGEN	84	VOQUEZNA TRIPLE PAK	129
VALSARTAN.....	71	VERKAZIA.....	159	.....	129
<i>valsartan-hydrochlorothiazide</i>	71	VERQUVO	78	VORANIGO.....	24
.....	71	VERSACLOZ	59	<i>voriconazole</i>	2
VALTOCO.....	31	VERZENIO	23	VORTEX HOLDING	
VALTREX	6	VESICARE	175	CHAMBER	174
<i>valtya</i>	155	VESICARE LS.....	175	VOSEVI	7
<i>vanadom</i>	39	<i>vestura (28)</i>	155	VOTRIENT	24
VANOCOCIN.....	15	VEVYE	159	VOWST.....	127
<i>vancomycin</i>	15	VFEND.....	2	VOXZOGO	114
<i>vandazole</i>	148	VIBERZI	127	VOYDEYA	99
VANFLYTA	23	VICTOZA 2-PAK	117	VRAYLAR.....	59
VANOS	95	VICTOZA 3-PAK	117	VTAMA	82
VANOXIDE-HC	88	<i>vienna</i>	155	VUITY.....	158
VANRAFIA	78	<i>vigabatrin</i>	31	VUMERITY	62
VAQTA (PF).....	136	<i>vigadrone</i>	31	VUSION.....	91
<i>varenicline tartrate</i>	100	VIGAFYDE.....	31	<i>vyfemla (28)</i>	155
VARIVAX (PF)	136	VIGAMOX.....	157	VYKAT XR.....	99
VARUBI.....	127	VIIBRYD	59	VYLEESI	59
VASCEPA.....	77	VIJOICE.....	23	<i>vylibra</i>	155
VASERETIC.....	71	<i>vilazodone</i>	59	VYNDAMAX	78
VASOTEC	71	VIMKUNYA.....	137	VYNDAQEL.....	78
VAXCHORA VACCINE ..	136	VIMOVO.....	47	VYTORIN 10-10.....	78
VAXELIS (PF).....	136	VIMPAT.....	31	VYTORIN 10-20.....	78
VAXNEUVANCE (PF)	137	VIOKACE	127	VYTORIN 10-40.....	78
VCF CONTRACEPTIVE		<i>viorele (28)</i>	155	VYTORIN 10-80.....	78
FILM	148	VIRACEPT	6	VYVANSE	59
		VIREAD.....	6, 7	VYZULTA	161

W		
WAINUA	37	
WAKIX	59	
<i>warfarin</i>	75	
<i>water for irrigation, sterile</i> ..	99	
WELCHOL	78	
WELIREG	24	
WELLBUTRIN SR	59	
WELLBUTRIN XL	59	
<i>wera (28)</i>	155	
<i>wescap-c dha</i>	183	
<i>wescap-pn dha</i>	183	
<i>wesnatal dha complete</i>	183	
<i>wesnate dha</i>	183	
<i>westab plus</i>	184	
<i>westgel dha</i>	184	
WEZLANA	82	
WIDE-SEAL DIAPHRAGM		
.....	143	
WINLEVI	88	
WINREVAIR	173	
<i>wixela inhub</i>	173	
<i>wymzya fe</i>	155	
WYNZORA	82	
X		
XACIATO	148	
XADAGO	33	
XALATAN	161	
XALKORI	24	
XANAX	59	
XANAX XR	59	
<i>xarah fe</i>	155	
XARELTO	75	
XARELTO DVT-PE TREAT		
30D START	75	
XATMEP	24	
XCOPRI	31	
XCOPRI MAINTENANCE		
PACK	31	
XCOPRI TITRATION PACK		
.....	32	
XDEMVY	159	
XELJANZ	142, 143	
XELJANZ XR	143	
XELODA	24	
XELPROS	161	
<i>xelria fe</i>	155	
XELSTRYM	59	
XENAZINE	37	
XENLETA	11	
XEPI	90	
XERESE	92	
XERMELO	24	
XHANCE	173	
XIFAXAN	11	
XIGDUO XR	117	
XIIDRA	159	
XIMINO	14	
XOFLUZA	7	
XOLAIR	173	
XOLREMDI	131	
XOPENEX HFA	174	
XOSPATA	24	
XPHOZAH	179	
XPOVIO	24	
XROMI	24	
XTAMPZA ER	42	
XTANDI	24	
<i>xulane</i>	148	
XULTOPHY 100/3.6	111	
XURIDEN	99	
XYOSTED	114	
XYREM	59	
XYWAV	59	
Y		
YASMIN (28)	155	
YAZ (28)	155	
YESINTEK	82	
YF-VAX (PF)	137	
YONSA	24	
YORVIPATH	114	
YOSPRALA	75	
YUFLYMA(CF)	143	
YUFLYMA(CF) AI		
CROHN'S-UC-HS	143	
YUFLYMA(CF)		
AUTOINJECTOR	143	
YUPELRI	174	
YUSIMRY(CF) PEN	143	
YUTREPIA	174	
<i>yuvafem</i>	147	
Z		
<i>zafemy</i>	148	
<i>zafirlukast</i>	174	
<i>zaleplon</i>	60	
ZANAFLEX	39	
<i>zarah</i>	155	
ZARONTIN	32	
ZARXIO	131	
<i>zatean-pn dha</i>	184	
<i>zatean-pn plus</i>	184	
ZAVZPRET	35	
ZCORT	104	
ZEJULA	24	
ZELAPAR	33	
ZELBORAF	24	
ZEMPLAR	114	
<i>zenatane</i>	88	
ZENPEP	127	
<i>zenzedi</i>	60	
ZENZEDI	60	
ZEPATIER	7	
ZEPOSIA	37	
ZEPOSIA STARTER KIT (28-		
DAY)	37	
ZEPOSIA STARTER PACK		
(7-DAY)	37	
ZERVIATE	159	
ZESTORETIC	72	
ZESTRIL	72	
ZETIA	78	
ZETONNA	174	
ZIAGEN	7	
ZIANA	88	
<i>zidovudine</i>	7	
ZIEXTENZO	131	
ZILBRYSQ	39	
<i>zileuton</i>	174	
ZILXI	88	
ZIMHI	47	
<i>zingiber</i>	184	
ZIOPTAN (PF)	161	
<i>ziprasidone hcl</i>	60	
<i>ziprasidone mesylate</i>	60	
ZIPSOR	47	
ZIRGAN	157	
ZITHROMAX	8	
ZITHROMAX TRI-PAK	9	
ZITHROMAX Z-PAK	9	
ZITUVIMET	117	
ZITUVIMET XR	117	
ZITUVIO	117	
ZMA CLEAR	88	
ZOCOR	78	
ZOKINVY	99	
ZOLINZA	24	
<i>zolmitriptan</i>	35	
ZOLMITRIPTAN	35	
ZOLOFT	60	
<i>zolpidem</i>	60	
ZOLPIDEM	60	
ZOMACTON	132	
ZOMIG	35	

ZONALON.....	84	ZOVIRAX.....	92	ZYFLO.....	174
ZONEGRAN.....	32	ZTALMY.....	32	ZYKADIA.....	24
ZONISADE.....	32	ZTLIDO.....	89	ZYLET.....	162
<i>zonisamide</i>	32	ZUBSOLV.....	47	ZYLOPRIM.....	137
ZONTIVITY.....	75	<i>zumandimine (28)</i>	156	ZYMFENTRA.....	127
ZORTRESS.....	24	ZUNVEYL.....	37	ZYPITAMAG.....	78
ZORVOLEX.....	47	ZURZUVAE.....	60	ZYPREXA.....	60
ZORYVE.....	82	ZYCLARA.....	84	ZYTIGA.....	24
<i>zovia 1-35 (28)</i>	156	ZYDELIG.....	24	ZYVOX.....	11